

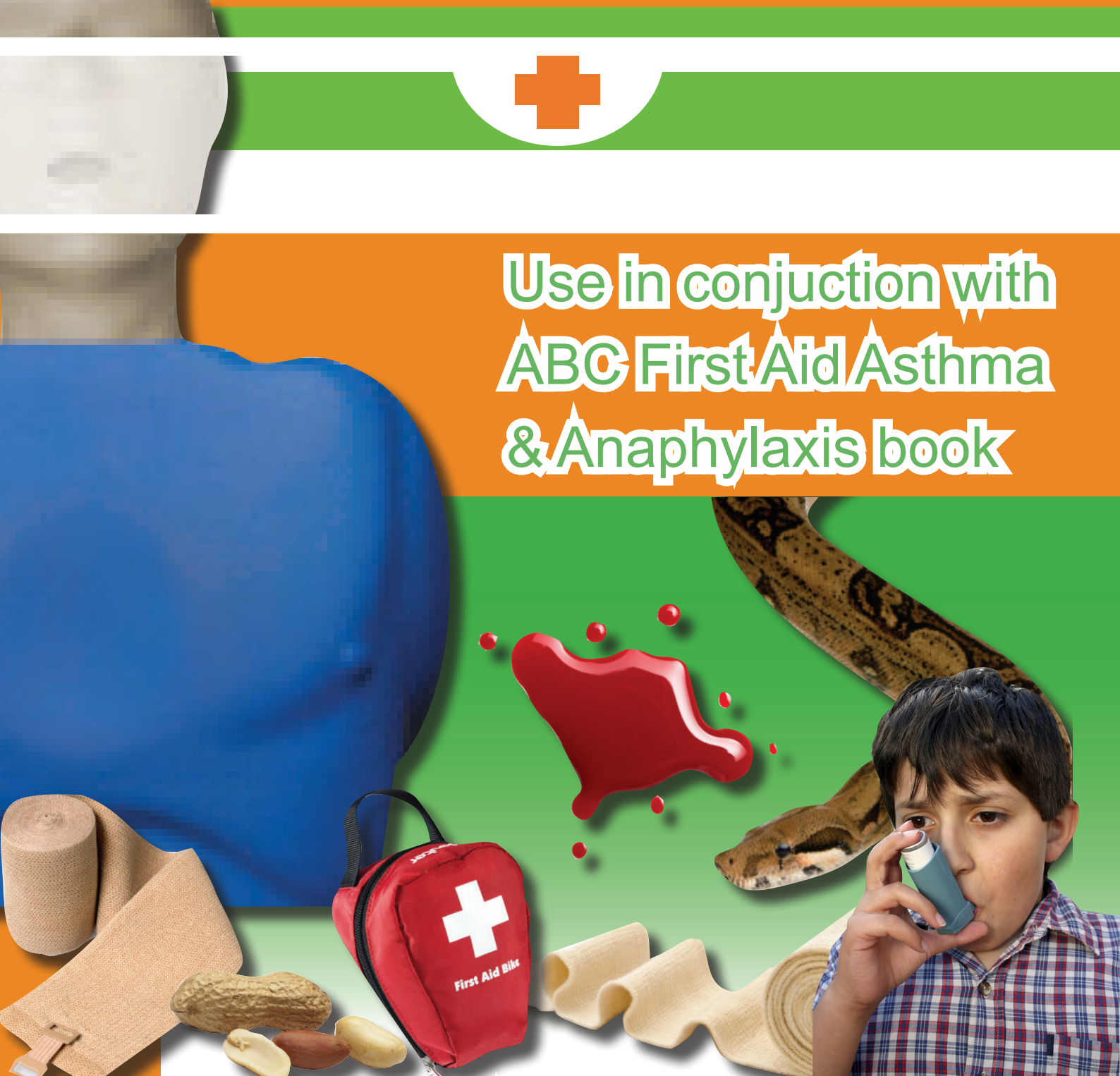
ABC

Student Workbook

95 MCQs - HLTAID003 - 006



Use in conjunction with
ABC First Aid Asthma
& Anaphylaxis book



DO NOT MARK THIS BOOK

Student Workbook

PLEASE READ THESE INSTRUCTIONS CAREFULLY

INSTRUCTIONS

- Please use the answer sheet provided, titled **HLTAID003-006 Workbook Answer Sheet**.
- **Do not mark this paper.**
- Use pen, not pencil.
- This assessment is multiple choice.
- Read each question carefully before attempting an answer.
- Select the **most correct** answer, for each question.
- When you have selected your answer, circle the corresponding answer.
- Only select **ONE** (1) answer per question.

EXAMPLE:

1. What does the 'A' stand for in DRSABCD?

- A. Artery
- B. Ambulance
- C. Airway
- D. Alert

Answer	A	B	C	<input checked="" type="radio"/> D
To change answer	A	B	<input checked="" type="radio"/> C	<input type="radio"/> D

- When you complete the workbook questions please contact our office to book your practical-class session, if you have not already done so.
- Bring with you to the class session your completed **Workbook Answer Sheet** and **Student Workbook**
- Your instructor will mark your Workbook Answer Sheet.
- Discussion time is allotted during the class session to discuss workbook questions and answers. During this time you can change incorrect answers as necessary.
- Pass mark = 100% (95 / 95)
- If you have learning difficulties, please advise your instructor so arrangements can be made to meet your needs.

Section 1: General First Aid

(Refer pgs 51-54)

1. **What are the main aims of First Aid?**
 - A. Prevent the illness or injury becoming worse.
 - B. Protect the casualty from further harm.
 - C. Provide reassurance & send for help if necessary.
 - D. All of the above.
2. **Which statement is false regarding First Aid Kits?**
 - A. Should be kept in a clean, dry location.
 - B. Should be locked away.
 - C. Everyone in the family/workplace should know where First Aid kit is kept.
 - D. All workplaces need to have a first aid kit.
3. **What does 'Duty of care' mean to a first aider?**
 - A. You need to help everyone even if it puts you at risk.
 - B. If you choose to provide first aid, do so to the best of your ability.
 - C. If you choose to provide first aid, remain with casualty even if the scene becomes unsafe.
 - D. If you choose to provide first aid, you are likely to face litigation.
4. **You CANNOT commence first aid if:**
 - A. The casualty is unconscious.
 - B. The casualty is a young child and a parent/guardian is not present.
 - C. The casualty seems confused or of unsound mind and refuses treatment.
 - D. The casualty is conscious and alert and refuses treatment.
5. **Hygiene is important to protect the first aider and the casualty against infection. What measures can be taken to ensure hygiene?**
 - A. A first aider should wash their hands with soap and water or disinfectant before and after touching casualty.
 - B. Wear gloves if available.
 - C. If available, use a face shield or mask when performing resuscitation.
 - D. All of the above.
6. **When phoning for an ambulance, what information is NOT provided to emergency services?**
 - A. Location of the emergency.
 - B. The casualty's medical insurance details.
 - C. Whether casualty is conscious and is breathing.
 - D. Number of casualties.



7. **'Chain of Survival' is a concept highlighting the steps critical to achieving successful recovery from cardiac arrest. The steps in the chain are:**
(Refer pg 5)

- A. Early recognition and call for help.
- B. Early CPR.
- C. Early defibrillation and advanced life support.
- D. All of the above.



8. **You arrive at a Road Traffic Accident where there are four casualties. After assessing the situation is safe, which casualty would you attend to first?:**
(Refer pg 16)

- A. The crying casualty.
- B. Unconscious casualty lying on his back.
- C. A conscious casualty who has moderate bleeding.
- D. All of the above



9. **You have broken a casualty's confidentiality if you:**

- A. Give casualty details and incident findings to ambulance officers at the scene.
- B. Give casualty details and incident findings to a medical practitioner at the scene.
- C. Speak to a counsellor for self-help regarding the incident but don't reveal casualty details.
- D. Speak to the neighbours about the incident and reveal casualty details.

10. **How might you recognise when a first aider may need professional help, following an emergency event?**

- A. Crying for no apparent reason.
- B. Difficulty sleeping.
- C. Excessive drinking or drug use.
- D. All of the above.

11. **Getting feedback about your performance following a first aid incident will improve future response and help you calm down. Who can you ask for feedback?**

- A. Ambulance officers.
- B. Medical practitioners/ nurses.
- C. First aid officer at your workplace.
- D. All of the above.

Section 2: Essential First Aid, Part 1

(Refer pgs 2-6)

12. **What do the letters DRSABCD stand for?:**

- A. Danger; Recovery; Send; Airway; Breathing; Circulation; Defibrillation.
- B. Danger; Response; Send; Airway; Breathing; Compressions; Defibrillation.
- C. Defibrillation; Rescue; Send; Airway; Breathing; Compressions; Danger.
- D. Danger; Resuscitation; Send; Airway; Breathing; Circulation; Defibrillation.

13. **Which of the following is not usually regarded as a danger/ hazard?**

- A. Broken glass.
- B. On-coming traffic.
- C. Bystanders.
- D. Fallen power line.

14. To determine if a casualty is conscious, you should:

- A. Shake and shout.
- B. Talk and Touch without aggravating any injuries.
- C. Slap and kick the casualty.
- D. Check the casualty's eyes.



15. A rescuer should commence CPR if a casualty is:

- A. Conscious and breathing normally.
- B. Conscious, breathing normally and confused.
- C. Unconscious, unresponsive, not breathing normally.
- D. Unconscious, unresponsive, breathing normally.

16. In which position should you place an unconscious casualty, who is breathing normally?

- A. On their back with head turned to one side.
- B. On their back with legs bent.
- C. On their side, in the recovery position.
- D. In an upright position.

Section 3: Essential First Aid, Part 2

(Refer pgs 2-6)

17. The purpose of the Recovery Position is to:

- A. Keep airway open and clear.
- B. Allows oral fluids and solids to drain freely onto ground.
- C. Allows tongue to fall clear of open airway.
- D. All of the above.



18. What can happen if an unconscious casualty is left on their back?

- A. Their relaxed tongue may fall back causing airway obstruction.
- B. Regurgitation of stomach contents may enter the lungs.
- C. Stomach contents spilling into the lungs may later cause pneumonia.
- D. All of the above.

19. Placing an unconscious breathing casualty in the recovery position ensures that:

- A. The heart will continue to work.
- B. Any vomiting will eventually cease.
- C. The casualty will be more comfortable.
- D. The airway will be kept open.

20. What techniques can be used to open and maintain an airway?

- A. Chin lift and backward head tilt.
- B. Chin lift and forward head tilt.
- C. Forward head tilt and nose pinch.
- D. Backward head tilt and nose pinch.



21. A person is unconscious and does not respond to you. They do not seem to be breathing normally, but are making gasping sounds. What should you do?

- A. Wait until the gasping stops before starting CPR.
- B. Gasping is common after cardiac arrest. This is not normal breathing. Commence CPR immediately, starting with compressions.
- C. Never touch a person until you have called an ambulance.
- D. Immediately put the person into the recovery position because they are unconscious and breathing.

22. A child is choking, conscious but not able to breathe. Your first action should be to:
(Refer pg 6)

- A. Place casualty on floor and give 3-4 hard abdominal thrusts.
- B. Administer CPR.
- C. Give up to 5 back blows between the shoulder blades.
- D. Do nothing and wait for the ambulance.



23. If a casualty has partial airway obstruction and is still able to talk, you should:

- A. Encourage the casualty to vomit.
- B. Give 5 chest thrusts.
- C. Encourage the casualty to relax and cough up the object.
- D. Lie casualty on ground and give 10 back blows.

24. What are signs of complete throat obstruction?

- A. Hands clutching stomach.
- B. Inability to breathe or speak.
- C. Doubled over clutching chest.
- D. Air moving in and out of mouth.

25. If attempts to dislodge an object from the throat hasn't worked and the casualty is now unresponsive and not breathing normally:

- A. Roll patient into recovery position.
- B. Commence pressure immobilization technique.
- C. Commence CPR.
- D. Continue with alternating back blows.

Section 4: Essential First Aid, Part 3

(Refer pgs 3-7)

26. When giving Rescue Breaths you know that the breath is effective if:

- A. You can feel a pulse.
- B. You can see the chest rise.
- C. You feel resistance when you try to give each breath.
- D. The casualty's skin turns blue.



27. If you are unable or unwilling to give rescue breaths you should:

- A. Give chest compressions only.
- B. Stop resuscitation.
- C. Wait for the ambulance.
- D. Place the casualty into the recovery position.

28. What are the signs of a casualty in cardiac arrest?

- A. Unconscious, normal breathing.
- B. Conscious, breathless.
- C. Conscious, chest pain.
- D. Unconscious, not responding, not breathing.

29. The ratio and cycles per minute of CPR performed on an adult by one or two rescuers is:

- A. 1 breath and 5 compressions about 12 times per minute.
- B. 1 breath and 5 compressions about 4 times per 2 minutes.
- C. 30 compressions and 2 breaths about 5 times per 2 minutes.
- D. 15 compressions and 2 breaths about 4 times per minute.

30. You are performing chest compressions on an infant. Which statement is **false**?

- A. Compress infant's chest approx. 1/3 of chest depth
- B. Use two fingers in centre of chest to deliver compressions
- C. Use one hand in centre of abdomen to deliver compressions
- D. Compress chest at a rate of 100-120 per minute



Section 5: Essential First Aid, Part 4

(Refer pgs 3-7)

31. Approximately, how often should you recheck for breathing and responsiveness when performing CPR?

- A. Every 5 mins.
- B. After 5 cycles.
- C. Every 2 mins.
- D. Do not stop CPR to check for breathing and responsiveness.

32. When are you able to stop CPR?

(Refer pg 5)

- A. If a doctor or qualified medical personnel pronounces life extinct.
- B. If the scene becomes unsafe.
- C. If the casualty starts breathing normally.
- D. All of the above.

33. When it is necessary to restrain a violent person, postural (or restraint) asphyxia can be caused when an obese person is physically forced to lie down. (Refer pg 6)

- A. True
- B. False

- 34. To prevent positional (or restraint) asphyxia, you should do the following:**
- A. Never monitor a restrained person.
 - B. Ignore any warning signs such as blue lips or gurgling or gasping sounds.
 - C. Never sit or lean on a person's abdomen. Avoid face down restraint unless absolutely necessary, and then return to face up as soon as possible.
 - D. Ignore a person telling you that they can't breathe.
- 35. Which statement is false regarding drowning?**
(Refer pg 7)
- A. You should only attempt CPR in deep water if trained to do so.
 - B. Remove casualty from water as soon as possible if safe to do so.
 - C. It's your duty of care to attempt a rescue beyond your capabilities.
 - D. Suspect spinal injury if casualty found face down in surf.

Section 6: Trauma, Part 1

(Refer pgs 12-14)

- 36. The correct management of a nosebleed is:**

- A. Pinch bony part of nose and lean backwards.
- B. Pinch fleshy part of nose, below the bone for 10 to 20 mins and lean forward.
- C. Pinch fleshy part of nose, below the bone and lean backwards.
- D. Ask casualty to lie flat and wait for bleeding to stop.



- 37. When treating a needle stick injury**

(Refer pg 53)

- A. Cover with a wound dressing. Bleeding is unlikely. No further treatment is necessary.
- B. Hold wound under running water then wash wound with soap. DO NOT scrub or suck wound. Refer to health care professional. Send the syringe with casualty if safe to do so.
- C. Call an ambulance because the risk of catching a serious infection is high.
- D. Disposable gloves provide good protection against needle stick injury.

- 38. When treating a casualty with a severe laceration to the arm, the first aider should first:**

- A. Apply ice to the wound.
- B. Use a tourniquet (constrictive bandage) above the wound.
- C. Apply direct pressure over the wound.
- D. Keep limb low, below the heart.



- 39. A casualty has cut himself with a sharp kitchen knife and the wound is spurting bright red blood. Which blood vessel has most likely been damaged?**

- A. Artery
- B. Vein
- C. Lymph vessel
- D. Capillary

- 40. Severe internal or external blood loss can produce the following symptoms:**

- A. Hot, red, dry skin.
- B. Strong, slow pulse.
- C. Cool, pale, sweaty skin.
- D. Hyperactivity.

41. **When transporting an amputated body part with a casualty to hospital it should be:**
- A. Placed directly in a container with ice.
 - B. Sealed in a plastic bag or wrapped in waterproof material before placing in a container of iced water.
 - C. Wrapped in a fresh towel or cloth.
 - D. Sealed in a plastic bag or wrapped in waterproof material and placed in a freezer.
42. **When managing a casualty with severe bleeding, protective equipment should be worn if readily available, such as:**
- A. Eye protection.
 - B. Gloves.
 - C. Plastic apron.
 - D. All of the above.

Section 7: Trauma, Part 2

(Refer pgs 14-15)

43. **When managing a casualty who has crushed his leg, you should:**
- A. Remove the crushing force as soon as it is safe to do so.
 - B. Do not remove the crushing force.
 - C. Apply a tourniquet to the leg above the injury.
 - D. Give casualty food to maintain energy.
44. **Shock is a term used to describe the loss of an effective blood circulation. The causes of shock may include:**
- A. Severe bleeding.
 - B. Heart attack.
 - C. Severe dehydration.
 - D. All of the above.
45. **The best position to place a conscious casualty in shock is:**
- A. Sitting upright.
 - B. Standing.
 - C. Lying down on their back.
 - D. Sitting in chair with head between knees.
46. **Which action would you take in the management of burns?**
- A. Remove all rings and watches from affected area and cool with running water.
 - B. Apply ice to cool the burnt area.
 - C. Break blisters.
 - D. Remove bitumen and adherent substances from skin.
47. **Which statement regarding burns is false?**
- A. Sunburn with reddening of skin is a superficial burn.
 - B. Partial thickness burns usually involve blistering of the skin.
 - C. Full thickness burns are always painful.
 - D. Full thickness burns are deep with a white or black appearance.



Section 8: Trauma, Part 3

(Refer pgs 16-18)

48. **Electrical burn injuries are usually more severe than is apparent from external appearance:**
- A. True
 - B. False

49. A person using an electrical power tool suddenly collapses. You suspect they have been electrocuted. Your initial response should be:

- A. Place person in recovery position.
- B. Check for signs of life.
- C. Keep the casualty warm.
- D. Disconnect the power and check for other dangers.



50. Electric shock may cause:

- A. Spinal injuries.
- B. Excessive thirst.
- C. Cardiac arrest and burns.
- D. Hyperthermia.

51. What is the number one rule you should follow when dealing with an electric shock situation?

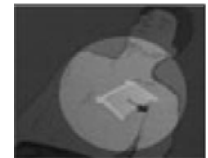
- A. Get as far away from the scene as possible.
- B. As a rescuer, do not put yourself in danger of being electrocuted.
- C. As a rescuer, it's your duty to rescue the casualty by all means possible.
- D. You should call for an electrician.

52. At work one of the employees has been accidentally stabbed in the chest with a kitchen knife. You should:

- A. Wait 10mins then pull out the knife.
- B. Immediately pull out the knife.
- C. Leave the knife in place and pack around it.
- D. Apply direct pressure to the knife.

53. Penetrating chest wounds which have air passing in and out can be managed by:

- A. Packing the hole with gauze swabs.
- B. Covering the hole with a plastic dressing taped on three sides.
- C. Applying a tight compressive bandage around the chest.
- D. Making the casualty lie flat on the ground.



54. A teenage girl is suffering severe abdominal pain following a car accident. You should suspect:

- A. Period pain and not be concerned.
- B. A seat belt bruise.
- C. Internal abdominal bleeding.
- D. Attention seeking and ignore her.


55. The treatment for protruding abdominal contents is:

- A. Push the abdominal contents back into the abdomen.
- B. Cover organs with dry gauze dressings.
- C. Cover organs with plastic wrap or a wet dressing.
- D. While in an upright position get casualty to support abdominal contents.



Section 9: Trauma, Part 4

(Refer pgs 19-21)

56. **A small object has landed in a child's eye. In an attempt to remove the object you would:**
- A. Use a cotton wool pad, and attempt to wipe the object from the eye.
 - B. Wash the object out with gentle irrigation.
 - C. Pick the object out with your fingers.
 - D. Cover the eye and call an ambulance.
- 
57. **When a casualty is regaining consciousness after a head injury, what could you say to offer reassurance and comfort?**
- A. "You've hit your head and been unconscious, you're safe".
 - B. "You've been unconscious for a few minutes after hitting your head. The ambulance is on its way – you'll be fine".
 - C. Hello, you're waking up after bumping your head, just relax, help is on the way".
 - D. All of above – as they explain casualty's condition and offer reassurance.
58. **What treatment would you give an unconscious casualty who has blood or straw-coloured fluid escaping from their ear?**
- A. Carefully lay casualty on their back, legs elevated.
 - B. Supporting head and neck lay casualty in recovery position, injured side down to allow free drainage of fluid.
 - C. Don't move them as you could make the injury worse.
 - D. Carefully bandage around their ear.
59. **In a workplace incident, one of the casualties was unconscious for a short time but is conscious and fully alert when you arrive on the scene and insists he is OK. You should:**
- A. Advise casualty to go home and rest
 - B. Advise casualty to seek medical advice as soon as possible
 - C. Call an ambulance
 - D. Advise casualty to rest for 2 hours, then resume normal activities if no symptoms develop
60. **A person bangs his head on a steel beam. He is conscious, did not lose consciousness but has a headache. The first aider should:**
- A. Monitor the casualty and arrange for urgent medical assessment
 - B. Tell the casualty to drive himself to a hospital urgently
 - C. Advise the casualty to sleep and to see their doctor the next day
 - D. Assume the casualty is suffering from concussion which will resolve soon
61. **A casualty has fallen over and hit their head quite hard. You have advised the casualty to consult their health care professional before returning to work. This is because:**
- A. A casualty may sustain significant head injury without loss of consciousness or memory loss
 - B. A casualty may have a brain injury without external signs of injury to the head or face
 - C. Serious problems may not be obvious for several hours after the initial injury
 - D. All of the above
62. **You suspect a casualty has suffered a spinal injury. It is important to:**
- A. Sit the casualty in a chair and don't let him move
 - B. Encourage casualty to move his arms and legs to keep blood moving
 - C. Tape the casualty down to restrict movement
 - D. Maintain the casualty's head in alignment with the shoulders and spine
63. **An unconscious casualty with a suspected spinal injury should be:**
- A. Left in the position found and monitored continuously
 - B. Carefully placed in the recovery position, supporting the head and neck
 - C. Positioned with head tilted slightly forward
 - D. Positioned so their body is straight

- 64. A casualty with suspected spinal injuries should be lifted and relocated:**
- A. So they are in a convenient location for the ambulance
 - B. Only when threatened by an immediate, uncontrollable danger
 - C. If the casualty doesn't like the current location
 - D. If the casualty and bystanders all agree that moving the casualty is desirable
- 65. If unable to control the airway, carefully remove a full-face motorbike helmet while ensuring minimal neck movement:**
- A. True
 - B. False

Section 10: Trauma, Part 5

(Refer pgs 8-11)

- 66. The management of a soft tissue injury such as a sprained ankle is the RICER method. What do these letters stand for?**

- A. Rub, Isolate, Calm, Exercise, Running
- B. Rest, Ice, Compression, Elevation, Refer & Report
- C. Rest, Ice, Compressions, Elevation, Radio for help
- D. Rub, Isolate, Calm, Elevate, Roll over



- 67. A fellow workmate falls awkwardly 1m off a step ladder and complains of pain in her leg. You suspect that her leg could be fractured because:**

- A. You observed her falling and she hit hard
- B. The casualty says it's broken
- C. You observe swelling and deformity in the leg
- D. The casualty is crying

- 68. The following signs and symptoms would indicate a fractured leg:**

- A. Tenderness, swelling, deformity, restricted movement
- B. Bruising, no swelling and able to move limb freely
- C. Bruising and laceration but able to run around
- D. Tenderness, no swelling and able to run around

- 69. You are not sure if your workmate's leg is fractured or dislocated. What is the best way to assist the casualty while you wait for the ambulance?**

- A. Begin to manipulate the leg.
- B. Immobilise the leg using pillows and padding.
- C. Apply ice pack for 10 mins then encourage casualty to try walking.
- D. Apply a heat pack to the injured area. Check the pack to ensure it does not cause a burn.

- 70. At a junior soccer match, a player is tackled and complains of a sore ankle. You suspect a sprained ankle as there is slight swelling, no deformity and the player is able to walk with a slight limp. The best management would be:**

- A. Encourage player to play-on.
- B. Take player off field; elevate leg, bandage and ice pack injured ankle.
- C. Take player off field, splint ankle and call an ambulance.
- D. Take player off field, elevate, apply a heat pack and bandage the injured ankle.



Section 11: Medical Emergencies, Part 1

(Refer pgs 33-37)

71. During a restaurant meal a friend suddenly becomes short of breath and wheezy, feels nauseated and their face becomes swollen and develops a rash. You suspect they are suffering from:

- A. An obstructed airway from choking on some food.
- B. A severe asthma attack.
- C. A heart attack.
- D. An anaphylactic reaction.



72. There are many triggers (causes) for severe allergic reactions and anaphylaxis. The most common triggers are:

- A. Adrenalin.
- B. New medication, insect stings, & foods such as nuts, eggs and seafood.
- C. Soap and shampoo.
- D. Fruit and vegetables.

73. Anaphylaxis can cause death in less than?

- A. 24 hours.
- B. A few minutes.
- C. A few days.
- D. Several hours.



74. When using an adrenaline autoinjector (EpiPen), which statement is correct?

- A. Press orange end against thigh.
- B. The needle protrudes from the blue cap
- C. Press blue cap firmly against thigh.
- D. Hold EpiPen firmly against thigh for 10 secs.

Section 12: Medical Emergencies, Part 2

(Refer pgs 23-24)

75. What are the usual signs and symptoms of a severe asthma attack?

- A. Coughing and wheezing.
- B. Shortness of breath and unable to speak in sentences.
- C. Cyanosis, distress and exhaustion.
- D. All of the above.



76. Asthma reliever medication is administered as follows:

- A. Give 4 consecutive puffs into a spacer and ask casualty to breathe from spacer for 4 mins.
- B. Give 1 puff into spacer and ask casualty to breathe in and out 4 times. Wait 4 mins before giving another puff.
- C. Using inhaler, administer 4 consecutive puffs as casualty inhales.
- D. Using a spacer, administer 1 puff and ask casualty to take 4 normal breaths. Repeat until 4 puffs are given. Wait 4 mins before repeating sequence.

77. Which statement about asthma is false?

- A. Asthma is a disorder of the airways that can cause respiratory distress
- B. Sitting upright is the best position to assist someone having an asthma attack
- C. Lying down is the best position to assist someone having an asthma attack.
- D. Asthma reliever medication when given to a non-asthma sufferer will do no harm

78. A young child who has a barking cough, mild fever and breathing difficulty, may be suffering from:

(Refer pg 24)

- A. Croup
- B. Epiglottitis
- C. Cardiac failure
- D. Renal failure



79. In the management of a child with croup, one thing you should not do is:

- A. Comfort and reassure child.
- B. Allow child to sit in a position of comfort.
- C. Examine child's throat to see if tonsils are enlarged. This can trigger a total airway obstruction.
- D. Seek medical aid.

80. Over-breathing can result from anxiety or stressful circumstances. Which of the following statements is false regarding hyperventilation?

(Refer pg 27)

- A. The casualty should breathe into a paper bag.
- B. Encourage casualty to slow their breathing down.
- C. The casualty may experience "tingling" in fingers and toes.
- D. The casualty may develop spasms in their fingers and hands.

Section 13: Medical Emergencies, Part 3

(Refer pgs 25-26)

81. A workmate who has diabetes, appears grumpy, confused and restless. You should first:

- A. Place him on his side and call an ambulance.
- B. Give him a diet drink and get him to sit down.
- C. Suggest he takes his insulin.
- D. Give him a sugary drink and monitor.



82. To assist a conscious person who is experiencing low blood sugar (hypoglycaemia) you should give the casualty:

- A. 5 – 7 jelly beans, repeat if casualty improves, follow later with a sandwich.
- B. 2 – 4 teaspoons of sugar or honey, repeat if improves, follow later with a few biscuits.
- C. Glass of fruit juice, repeat if improves, follow later with a pasta/rice meal.
- D. All of the above.

83. Which statement is true about seizures and convulsions?

- A. Convulsions can be associated with a rapid rise in temperature (febrile convulsion), alcohol, epilepsy, head injury and other medical conditions.
- B. The first aid response for convulsions is to protect the casualty from injury, roll into recovery position when seizure ceases and monitor breathing.
- C. Seizures occurring in water can be life threatening.
- D. All of the above.



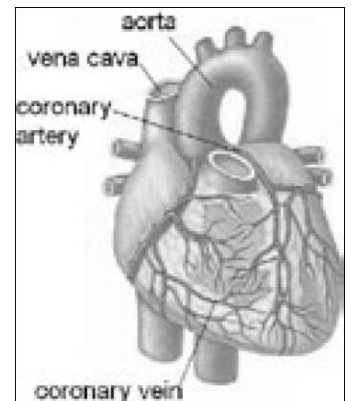
84. The first aid management of a casualty who has fainted is:

- A. Sit casualty in a chair and place head between the knees.
- B. Lie casualty flat. Place casualty in recovery position if consciousness is not regained within a few seconds.
- C. Maintain casualty in an upright position.
- D. None of the above.

85. The signs and symptoms of a person suffering a heart attack may include:

(Refer pg 22)

- A. Breathlessness or difficulty 'catching the breath'.
- B. Pain, pressure, heaviness or tightness.
- C. Pain in chest, jaw, neck, shoulder, arm or back.
- D. All of the above.



86. An elderly gentleman known to have angina experiences "heaviness" in his chest while walking up a hill. You should:

- A. Advise him to take a painkiller and to see his doctor later in the day.
- B. Assume he is just unfit and do nothing.
- C. Keep him at total rest, assist with any medication, reassure and monitor. Call an ambulance if no improvement.
- D. Suspect indigestion and give him a glass of milk.

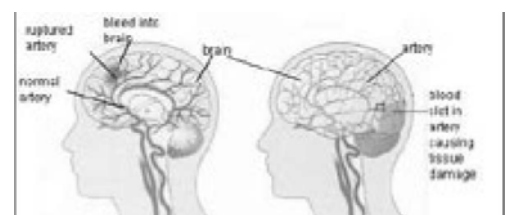
87. You are with a friend who starts to complain of chest pain, feels nauseated and is short of breath. You suspect your friend is having a heart attack. Suddenly your friend falls to the ground. You should:

- A. Immediately commence CPR.
- B. Immediately place one of their heart tablets under their tongue.
- C. Immediately provide them with oxygen if you have access to it.
- D. Check for danger and response, get someone to call an ambulance, open airway, check breathing, commence CPR, ask for a defibrillator.

88. An elderly person appears to have difficulty speaking, and one side of the face is drooping. They could be suffering from:

(Refer pg 27)

- A. Anaphylaxis
- B. Severe angina.
- C. A stroke.
- D. Hypoglycaemia (low blood sugar).



89. FAST is a simple way for remembering the signs of a stroke. The letters stand for:

- A. Fast, Accurate, Simple, Tasks.
- B. Facial weakness, Arm weakness, Speech problems, Time to act fast.
- C. Facial weakness, Arm strength, Speech perfection, Timely exit.
- D. Facial weakness, Arm strength, Speech perfection, Time to act fast.

Section 14: Medical Emergencies, Part 4

(Refer pgs 28-32)

90. During a “fun-run” on a hot day, a participant appears hot, has hot, dry skin and is confused and staggering. The first aider should:

(Refer pg 28)

- A. Give the participant a cool drink and allow to continue
- B. Lie casualty down, and treat for heat exhaustion
- C. Cool casualty in an ice bath
- D. Lie casualty flat, call an ambulance, apply ice packs to neck, groin and armpits, give sips of cool water if conscious, monitor vital signs.



91. Management of a person suffering from severe hypothermia is:

(Refer pg 29)

- A. Massage the legs and give plenty of hot drinks
- B. Re-warm the casualty slowly
- C. Sit casualty in front of a fire and give brandy
- D. Take casualty's clothes off and advise to take hot shower

92. Which statement is true regarding poisons:

- A. The number for Poisons Information is: 13 11 25
- B. Syrup of Ipecac induces vomiting and should be used immediately if a poison is swallowed.
- C. The correct first aid response will depend on the type of poison. Safe work practices should include procedures for known hazardous substances in the workplace
- D. If poison spills over the skin, allow poison to dry and apply a Pressure Immobilisation Bandage.

93. The Pressure-Immobilisation Technique (PIT) is used for envenomation by:

(Refer pgs 30-31)

- A. Redback spider, snake, and blue-ringed octopus
- B. Funnel web spider, snake, and blue-ringed octopus
- C. Funnel web spider, snake and stonefish
- D. Redback spider, snake and stonefish



94. A casualty has been bitten on the lower leg by a snake. You should:

- A. DRSABCD, apply a broad bandage over the site. Then use Pressure Immobilisation Technique (PIT) starting from toes working up to groin. Call ambulance immediately
- B. DRSABCD, wash the bitten area then apply Pressure Immobilisation Technique (PIT) from toes to groin. Call ambulance immediately
- C. DRSABCD, wash site with vinegar then apply PIT.
- D. DRSABCD, elevate limb for 10mins then apply PIT.

95. Vinegar is used in the first aid treatment of:

(Refer pg 30)

- A. Blue bottle and fish stings
- B. Red back and funnel web spider bites
- C. Box jelly and Irukandji
- D. Bee and wasp stings

END

ABC Student Workbook

95 MCQS - HLT AID 003-006

This Re-usable workbook contains 95 multiple choice style questions which are page referenced to the **ABC of First Aid Asthma & Anaphylaxis** book.

Use the **ABC of First Aid Asthma & Anaphylaxis** book to assist you with answering the questions in this workbook.

DO NOT MARK THIS BOOK -
Record your answers on the **HLT003-006 Workbook Answer Sheet** which your instructor will supply.

In conjunction with an approved course, this workbook will assist you learn the skills required.

The questions within this workbook are compliant with the latest ARC guidelines and the Australian Health Training Package competency units:

HLTAID001: Provide CPR

HLTAID002: Provide Basic Emergency Life Support

HLTAID003: Provide First Aid

HLTAID004: Provide an Emergency First Aid Response in an Education and Care Setting

HLTAID005: Provide First Aid in Remote Situations

HLTAID006: Provide Advanced First Aid

ABC Student Workbook

HLTAID003-006

