

Instructions to attempt the MCQ'S

Circle the correct Answer. Discuss it with your trainer if you have any doubt before marking on the answer sheet. Passing marks is **100%.** If you require guidance or assistance completing the theory questions, please visit the website to access the online textbook "Fun with First Aid" at <u>https://www.nationalfirstaid.com.au/nfa-textbook/?page=1</u>

General questions

- 1. Your FIRST action at an emergency is to:
- A) Send for help call 000
- B) Assess for Danger to yourself, bystanders and the patient
- **C)** Check for the airway
- D) Check for breathing

2. In an event of an emergency, the number to call is:

- **A.** 911
- **B.** 111
- **C.** 000
- **D.** 999
- 3. In the event of an emergency, providing it is safe to do, you should attempt to assist as best you can within your skills and limitations.
- A. True. B. False

4. A duty of care in First Aid refers to:

A. The moral responsibility one person may feel for the well being of another person who they would like to marry.

B. The legal responsibility one person may feel for the well being of another person

C. The legal responsibility of a first aider to provide medical assistance when they have chosen to engage or have responsibility in a first aid incident/event/emergency.

5. The correct method of checking consciousness/response in a casualty is:

- A. Call out to the patient and ask 'What is your name?'
- B. Gently tap the patient on shoulder and ask 'Can you hear me?'
- **C.** Grasp and squeeze the shoulders firmly to check for response
- **D.** All of the above

6. When managing a patient, you must:

- A. Be culturally aware and sensitive
- B. Communicate gently and in a respectful manner
- C. Be understanding, calm and reassuring
- D. All of the above

7. Which of the following conditions has first priority?

- A. A young patient with a suspected fracture
- B. An elderly patient with chest pain
- C. An unconscious patient lying on his back
- D. A middle-aged patient with a deep cut to her arm



8. Consent must be obtained before treating a competent victim of illness/accident. However, consent is implied if:

- **A.** The casualty is unconscious
- B. The casualty is conscious but having shallow breathing
- C. The casualty is having serious illness
- D. The casualty is having chest pain
- 9. Emergencies can often result in emotional stress, trauma, anxiety and distress. What is the best method of debriefing if you are not coping after an incident?
- A. Talking in confidence with a counsellor or doctor
- B. Dismissing the thoughts and allowing time to heal
- C. All of the above
- 10. A designated first aider in their workplace has a duty of care to provide assistance in event of an emergency or illness / injury in that workplace.
- A. True. B. False

11. Which precautions can reduce the risk of cross infection when providing first aid?

- A. Using a resuscitation mask or face shield
- B. Being aware of blood and bodily fluids
- C. Wearing disposable gloves
- D. All of the above

12. A basic First aid kit must contain:

- A. Resuscitation mask and disposable gloves
- B. Sterile wound coverings and roller bandages
- C. Instant Ice pack and anti-septic cream wipes
- D. All of the above

13. Which of the following questions should you be prepared to answer when calling for help (000)?

- **A.** What is the exact location of the emergency?
- B. What is the phone number you are calling from?
- C. Is the patient conscious and breathing?
- D. All of the above
- 14. All patient first aid records in the workplace are to be kept confidential and secure unless requested by a legal authority, the patient or an authorized person in the workplace.
- A. True B. False

RESUSCITATION/ CARDIAC ARREST

15. The signs of cardiac arrest in an unconscious patient include:

- **A.** Coughing and sighing
- **B.** Gurgling
- C. Agonal gasps
- D. All of the above



16. An unconscious casualty is considered as 'breathing' when they take:

- **A.** 1 breath every 30 seconds
- B. A random gasp for air now and then
- **C.** More than 1 breath in a 10 second duration

17. You should commence CPR when a patient is:

- A. Unconscious, not responding, not breathing normally, Not moving
- B. Unconscious, breathing normally, not responding, Not moving
- C. Conscious, Responding, Breathing normally, Moving
- **D.** All of the above

18. CPR should be positioned on:

- A. Lateral side of the chest
- B. Lower half of sternum (centre of chest)
- C. Upper half of sternum

19. The recovery position is lifesaving because it helps maintain a clear and open airway by:

- A. Causing the jaw and tongue to fall forward
- **B.** Allowing blood, vomit or other fluid to drain, thereby minimizing the risk of airway obstruction
- C. Reducing the risk of inhaling foreign material
- **D.** All of the above

20. The 4 steps in the chain of survival are:

- A. Early recognition, Early defibrillation, Early ambulance, Early hospital assistance
- B. Early defibrillation, Early CPR, Early Ambulance response, Early Medical treatment
- C. Early Recognition, Early CPR, Early Defibrillation, Early advanced life support

21. To open the airway of a child or adult you must apply:

- A. Backward head tilt
- B. Chin lift
- C. A combination of backward head tilt and chin lift

22. The correct CPR ratio is:

- A. 30 breaths to 2 compressions
- B. 30 compressions to 30 breaths
- C. 30 compressions to 2 breaths

23. If a woman requires resuscitation and she is in advanced stage of pregnancy you position her:

A. Onto her back with shoulders flat

B. If possible, place a padding such as a cushion under the right hip to tilt the hips slightly to the left while keeping shoulders flat.

- C. On her back with her head turned to the side
- **D.** Both A and B



24. Chest compressions should be commenced at the rate of at least:

- A. 55 compressions/ minute
- **B.** 100 compressions/ minute
- C. 75 compressions / minute

25. An AED is used when you find a casualty in which of the following conditions?

- A. Not breathing, not moving, not responding
- **B**. Moving, not responding, breathing
- C. Responding, breathing, not moving

26. When applying a defibrillator (AED), it is important that the electrodes (pads) are placed on the patient's chest according to the diagrams.

A. True. B. False

27. All currently available AED devices perform regular self-checks and need very little maintenance. However, you should:

- A. Replace Expired batteries and other consumables in line with their expiration date
- B. Replace AED pads once they have been used
- C. Follow the manufacturer's instructions regarding the use and maintenance of the device
- D. All of the above

28. When applying AED to an unconscious casualty, you should:

- **A.** Avoid placing pads over the implantable devices or medical patch
- B. Avoid touching the person during shock delivery
- C. Follow the voice prompts carefully
- D. All of the above

29. A man is unconscious and is breathing? You position him:

- A. On his back
- B. On his side (recovery position)
- C. On his back with his head turned to the side

30. When do I stop resuscitation?

- **A.** If the patient responds or begins breathing normally
- B. If ambulance or medical assistance arrives and takes over
- C. If you are physically or emotionally unable to continue
- D. Any of the above

31. The Australian Resuscitation Council recommends that CPR be updated every:

- A. Every 5 years
- B. Every 12 months
- **C**. Every 3 years
- **D**. As required

32. Compressions in CPR should:

- A. Be positioned on the upper half of the sternum
- **B**. Total 15 for every 3 breaths
- **C**. Be 1/3rd of the depth of the chest



33. When applying resuscitation to an infant,

- A. Mouth and nose should be sealed
- B. Give two rescue breaths (gentle puffs)
- C. Ensure that the abdomen rises and falls after each puff
- **D.** All of the above

34. Compressions on an infant are performed by applying:

- A. One hand over the lower half of the sternum
- B. Two fingers over the lower half of the sternum
- **C.** Two hands over the lower half of the sternum

35. If applying an AED to a child under 8 years of age, ensure that:

- A. The pads do not touch each other
- B. Pediatric pads are used if available (place on the front of chest / middle of back)
- **C**. The child is unconscious and not breathing normally
- **D.** All of the above
- 36. For an infant you do not apply head tilt because the trachea is softer and airway is narrower than an adult. Head tilt may cause damage to the airway, distort the soft tissues of the neck and restrict breathing.
- A. True. B. False

CHOKING

37. A partial airway obstruction refers to:

- A. The casualty is still managing to get some air in and may be able to cough up the obstruction
- **B.** A blockage that requires immediate ambulance attention
- C. An airway obstruction that will cause cyanosis in the victim

38. A middle aged man suddenly becomes distressed. He appears to be choking and points to his throat. He cannot speak, and his face is turning blue. You should:

- A. Reassure him and offer him a glass of water
- B. Encourage him to cough to help dislodge the obstruction
- C. Begin CPR
- D. Lean him forward and give up to 5 back blows between the shoulder blades followed by 5 chest thrusts.

39. For a person who is coughing and appears to be choking. You should:

- A. Encourage the patient to cough to help dislodge the obstruction
- **B.** Apply sharp back blows to help dislodge the obstruction
- C. Apply abdominal thrusts to help dislodge the obstruction

BLEEDING/ WOUNDS/ SHOCK

40. In an event of life-threatening bleeding (e.g., amputated limb/ shark attack), control of bleeding takes priority over airway and breathing interventions.

A. True

B. False



41. Common triggers of shock include:

- A. Fluid loss (blood loss or dehydration)
- B. Burns
- C. Poisoning
- D. All of the above

42. What are some signs and symptoms of shock?

- A. Cold, pale sweaty skin, Rapid breathing
- B. Anxiety, restlessness and confusion
- **C.** Drowsiness and possible unconsciousness
- D. All of the above

43. What is the best position for a conscious patient suffering from shock?

- A. Sitting up
- **B.** In the recovery position
- C. Standing up
- **D.** In a position of comfort, ideally lying down

44. When treating shock, you should:

- **A.** Give the person glass of water and tell them to calm down
- B. Let the casualty choose a comfortable position and keep them warm
- C. Lie the casualty down and encourage them to vomit
- D. Encourage patient to walk around to encourage circulation

45. What is the correct method when caring for an amputated body part?

- A. Place the amputated part directly in ice
- **B.** Place the amputated part directly in chilled water
- **C.** Wrap the amputated part in a piece of clean material and seal in a plastic bag then place the bag in cool water and add ice if possible
- D. Place the amputated part in a refrigerator

46. If you are accidentally injured by a needle (needle stick injury), you need to:

- A. Wash the area thoroughly with soap and water (a mild antiseptic is also recommended)
- B. Apply a clean, preferably sterile adhesive dressing to the area
- **C.** Obtain advice from a doctor as soon as possible
- D. All of the above

47. An employee is holding his arm and you notice a piece of metal embedded. You need to:

- **A.** Apply pressure bandage on the object
- B. Build up padding around the object
- C. Use tweezers to remove the object
- **D.** Flush the wound with water and bandage

48. Non-life-threatening bleeding or bleeding from minor wounds (cuts/grazes/lacerations) is best managed by:

- A. Applying firm direct pressure over the bleeding point
- B. Wash the wound thoroughly with water
- C. Cover the wound with sterile dressing
- D. All of the above



49. RICER technique for soft tissue injuries refer to:

- A. Reassurance, Ice, Compression, Elevation, Refer
- B. Rest, Ice, Compression, Elevation, Refer and record
- C. Rotate, Ice, Care of wound, Elevation, Refer

ASTHMA

50. What are the main factors that cause the airways to narrow?

- **A.** The muscles around the airway tightens (bronchial constriction)
- B. The inside lining of the airways becomes swollen (inflammation)
- C. Extra mucus (sticky fluid) may be produced
- D. All of the above

51. Common triggers of Asthma are:

- A. Colds, flu, cigarette smoking
- B. Exercise / physical activity, allergic reaction to pollen / dust / insect stings
- C. Exposure to sudden changes in the weather (particularly cold and wet conditions)
- D. All of the above

52. Signs and symptoms of severe asthma include:

- A. Severe breathing difficulty and chest tightness
- B. Use of extra muscles to breath, absent or increased wheezing
- C. Showing signs of shock
- **D.** All of the above

53. Ventolin is a reliever medication and is used in an asthma emergency because:

- **A.** It relaxes the smooth muscles around the airways
- **B.** It lowers the heart rate
- C. It is an effective pain reliever

54. A patient with asthma should be managed:

- A. Sitting upright, leaning forward to assist with breathing
- **B.** In the recovery position
- **C.** On their back

55. To correctly and effectively administer asthma reliever medication you:

- **A.** Give 2 separate puffs with 2 breaths per puff and wait 2 minutes
- **B.** Give 2 separate puffs with 4 breaths per puff and wait 4 minutes
- C. Give 4 separate puffs with 4 breaths per puff and wait 4 minutes
- **D.** Give 1 separate puff with 1 breath per puff and wait 4 minutes

ALLERGIC REACTION/ ANAPHYLAXIS

56. An allergic reaction develops into anaphylaxis when:

- A. Respiratory system and/ or cardiovascular system is involved
- B. Nervous system is involved
- C. Musculoskeletal system is involved



57. The first aid management of anaphylaxis includes:

- A. Calling for help / 000 and reassuring the patient
- B. Giving an adrenaline auto injector e.g. EpiPen
- C. Being prepared to commence CPR if patient stops breathing
- D. All of the above

58. Some common causes of Anaphylaxis are:

- A. Nuts, tree nuts, eggs, soy, sesame
- **B.** Milk, fish, shellfish, wheat
- C. Bees, wasps, ants
- D. All of the above

59. Which of the following is associated with an Allergic / Anaphylactic reaction?

- A. Nausea / vomiting
- B. Skin redness / itchiness
- C. Breathing difficulty/ chest tightness
- **D.** All of the above

STROKE & HEART CONDITIONS

60. A stroke occurs when the blood supply is disrupted to the:

- A. Heart
- B. Brain
- C. Lungs

61. F.A.S.T is an easy way to remember the most common signs of stroke. FAST stands for:

- A. First Aid, Airway, Send for help, Tongue
- B. Face, Arm, Speech, Time
- C. Faint, Allergy, Shock, Transient ischemic attack

62. Angina pain is generally relieved and subsides with rest and medication however, heart pain is not.

A. True. B. False

63. Common risk factors for heart diseases include:

- A. Smoking
- **B.** High blood cholesterol levels
- **C.** Diet rich in fats and lack of exercise
- D. All of the above

64. Signs and symptoms of a heart attack may include:

- A. Heavy pain in chest / sometimes radiating
- B. Fatigue / Dizziness
- C. Nausea / vomiting
- D. All of the above

65. A man with a history of angina has chest pain. He has taken two doses of his medication however after 10 minutes of rest, the pain persists. What should you do?

- A. Closely monitor his progress
- **B.** Reassure the patient
- **C.** Call an ambulance



D. All of the above

66. To manage a suspected heart attack, the best position to have the patient is:

- A. In the recovery position
- B. In a position of comfort, generally sitting upright, supported and leaning forward
- **C.** Walk around to help reduce the pain
- D. Lie on their back

HEAD, NECK AND SPINAL INJURY

67. Which of the following are the signs of a head injury?

- A. Loss of memory particularly of the incident
- B. Blurred, double vision, headache
- C. Drowsiness, confusion, agitation, irritability, seizures
- D. All of the above

68. The most important indicators of a head, neck or spinal injury is the history of the incident and mechanism of injury.

- A. True B. False
- 69. Care of the airway takes precedence over any other injury (including head, neck and spinal injury).
- A. True. B. False

70. When the spinal cord is damaged, there may be:

- A. Loss of sensation or tingling and burning feelings. Loss of bladder or bowel control
- **B.** Floating sensations (described as if the patient has become detached from their body)
- C. Loss of control or weakness of the limb. All movement may be absent, Difficulty breathing
- D. All of the above

71. Signs and symptoms of concussion are:

- A. Brief loss of consciousness / Dizziness / confusion/ nausea / vomiting
- B. Blurred vision, short term memory loss, mild or generalized headache
- C. All of the above
- D. None of the above

72. Seizure may follow a head injury.

- A. True. B. False
- 73. Escape of blood or watery fluid from the ears, nose or mouth can indicate a head injury.
- A. True. B. False

POISONING

- 74. A poison may be injected, inhaled, ingested (through the mouth) or absorbed (through the skin)
- A. True. B. False



75. When managing a person who has inhaled a poison you should:

- **A.** Give water to help dilute the poison
- B. Carefully assess for dangers to ensure that you are not also affected and call 000
- **C.** Induce vomiting

HEAT / COLD INJURY

76. Heat exhaustion is best managed by:

- A. Lying the patient flat with legs elevated
- **B.** Fan the patient to help stay cool
- C. Give sips of cold water if conscious and not feeling sick
- D. All of the above

77. Severe hypothermia (30 degrees Celsius or less) can lead to cardiac arrest.

A. True. B. False

78. Hypothermia is best managed by:

- A. Gradual cooling to help lower body temperature
- B. Gradual warming to help elevate body temperature
- C. Direct heat (such as a heater / fireplace) to quickly increase body temperature
- D. Direct cooling to quickly reduce body temperature

BITES AND STINGS

79. Snake bite is best managed by:

- A. Ice / cold compress
- **B.** Tourniquet
- C. Pressure Immobilization

80. A Red back spider is best managed by:

- A. Ice / cold compress
- B. Tourniquet
- **C.** Pressure Immobilization
- D. Heat/ hot compress

81. A bee sting (not anaphylactic in reaction) is best managed by:

- A. Ice / Cold compress
- B. Vinegar
- C. Pressure immobilization
- D. Heat / Hot compress

82. A bee may leave a visible barb at the wound site. You should:

- A. Leave it in place as it may inject more venom if you touch it
- **B.** Remove it by gently 'flicking' or scraping it sideways
- C. Try to remove with a pair of tweezers



83. Common Jellyfish stings are best managed by:

- A. Carefully picking off any tentacles stuck to the skin
- B. Rinsing well with sea water
- C. Not applying vinegar or rubbing the stung area
- D. All of the above

84. The role of vinegar on tropical jellyfish sting is:

- A. To inactivate the discharge of stinging capsules and to prevent further injection of venom
- B. To help calm and reassure the patient
- C. To relieve pain already present

SPRAINS, STRAINS AND DISLOCATIONS

85. A dislocated finger should be

- A. Quickly relocated back into place
- B. Supported, padded and RICER technique applied
- **C.** Pressure Immobilised

86. Sprains / strains / Dislocations are best managed by:

- A. Application of RICER technique
- B. Application of heat

87. Signs and symptoms of a fracture include:

- A. Intense pain at the injury site
- B. Deformity / Angulation, Loss of power, numbness and tingling sensations
- C. Tenderness, bruising, swelling, inflammation, discoloration over or around the affected area
- **D.** Any or all of the above

88. If you are uncertain if the injury is a dislocation, manage as a fracture and gently immobilize in the position found.

A. True. B. False

DIABETES

89. The normal blood sugar level ranges between:

- A. 4.0 to 7.8 mmol/l
- **B.** 3.0 to 8.8 mmol/l
- C. 4.5 to 6.8 mmol/l

90. A known diabetic patient is conscious but confused, light headed and dizzy. You should:

- A. Call ambulance 000
- B. Give some diet soft drink provided the patient can swallow safely
- C. Give some high energy food (sugar/honey) provided the patient can swallow safely
- D. Give a dose of insulin to help balance sugar levels

91. Diabetic Hypoglycemia or low blood sugar is often caused by:

- A. Over eating
- B. Administering too much sugar
- **C.** Drinking too much water
- D. Missing a meal or over exercising



92. The signs and symptoms of Hyperglycemia or high blood sugar are:

- A. Hot, dry skin
- **B.** Complaining of extreme thirst
- C. Fruity odor smell on their breath
- D. All of the above

93. When in doubt if the patient has low or high blood sugar, treat as low blood sugar.

A. True. B. False

EPILEPSY, SEIZURES AND CONVULSIONS:

94. Common triggers of seizures/ convulsions are:

- A. Flickering lights, computer games
- B. High grade fever
- **C.** Head injury
- **D.** All of the above

95. For an epileptic seizure, you should NOT:

- A. Call Ambulance 000
- B. Restrain the patient
- **C.** Place the patient into the recovery position
- **D.** Wait for at least 10 minutes as the seizure will eventually stop

96. A child has a fever and convulsing, you should NOT:

- A. Over cool the child
- B. Put anything into their mouth
- **C.** Forcibly restrain the child
- D. All of the above

97. If a person has a seizure your first priority is to:

- A. Protect person from any danger
- **B.** Place person in the recovery position
- C. Time the seizure
- D. Call an ambulance

98. A seizure may continue for several minutes. When it stops, you should:

- A. Sit the patient upright, leaning forward
- B. Keep the patient conscious to ensure the airway is open and clear
- C. Place the patient in the recovery position to ensure the airway is open and clear
- D. Help administer their medication

EYE & EAR INJURIES

99. For a large embedded object in the eye you should first :

- **A.** Flush the eye gently with water to help remove the object
- **B.** Cover the injury with a light pad and bandage
- C. Remove the object to prevent further damage
- D. Leave the object in place / gently packed around so it won't move



100. A minor eye irritation can be managed by using a gentle stream of water to flush the object out :

- A. True
- B. False

101. Young children tend to poke small objects into their ear. If a foreign object becomes lodged in the ear, you should:

- A. Have the patient sitting, leaning forward with the head tilted towards the affected side
- **B.** Manage with the head downward and to the side, a loose object will fall out
- C. If the object is not firmly/ deeply lodged, carefully grasp it with tweezer and gently remove
- D. All of the above

102. When an insect/bug crawls into the ear, you should:

- **A.** Have the patient lying on his back with head tilted to the side
- B. Pour water into the affected ear
- C. Have the patient sitting, leaning forward with the head tilted towards the affected side / shine a light into the ear in darkened room

BURNS AND SCALDS

103. A worker has sustained a severe burn. You should FIRST:

- A. Apply ICE to help rapidly cool the area
- B. Cool the burn with water for at least 20 minutes
- C. Apply burn cream to help reduce the pain

104. The immediate management for a chemical burn to the eye is:

- **A.** Open eyelids and flush with warm water for 20 minutes
- B. Keep eyelids closed and flush with warm water for 20 minutes
- C. Open eyelids and flush with cool running water for at least 20 minutes
- D. Open eyelids and flush with cool running water for 10 minutes

105. A patient has clothing stuck to her burnt skin. You should:

- A. Carefully pull it away from the burnt area
- B. Carefully cut around the stuck clothing

106. A hot water burn is managed immediately by:

- **A.** Immediately apply cool running water for at least 20 minutes
- B. Applying Ice packs on the affected area
- C. Applying antiseptic cream on the affected side

107. Burns are classified as:

- **A.** Superficial (involve the top layer of skin epidermis)
- **B.** Partial thickness (top and second layer of skin epidermis and dermis)
- C. Full thickness (all skin tissues and deep underlying tissues are involved)
- D. All of the above



FRACTURES

108. The principles of First Aid for broken bones are:

- A. Immobilize and apply ICE
- B. Elevate limb
- C. Give pain relief and seek medical help
- **D.** All of the above

109. A closed fracture (no bone protruding) should be treated by:

- A. Applying Ice to help reduce swelling and pain
- **B.** Support and immobilize in position found
- C. Elevated to help reduce internal bleeding
- D. Gently straighten to help realign the broken bone ends and to reduce pain

110. When managing an open fracture (bone is protruding)

- **A.** Control bleeding
- **B.** Splint / Immobilize the injured limb
- C. Elevate the limb to reduce pain

111. A football player has sustained a possible fractured arm. You should:

- **A.** Assist him into the position of most comfort generally sitting with the arm gently supported and secured across the injured chest area
- B. Ask him to move his arm to increase circulation to the injured area
- **C.** Straighten the injured arm to relieve pain

CRUSH INJURY

112. As a general rule crush syndrome injury is where:

- A. A major muscle mass is involved
- B. Prolonged period of compression may be as little as one hour but typically 4-6 hours
- C. Blood circulation to the affected area is compromised / restricted
- D. All of the above

113. When managing a crush injury, you should NOT:

- A. Commence CPR
- B. Apply an arterial tourniquet
- **C.** Keep the patient warm
- D. Manage blood loss

114. The crushing force should:

- A. Not be removed as sudden removal can cause further injury
- B. Be removed quickly if physically possible and safe to do so

ABDOMINAL INJURY

115. An abdominal trauma wound can lead to organs protruding. You should:

- A. Gently place them back into the abdomen
- B. Not touch them wait for Ambulance
- C. Cover with a moist, preferably sterile non-stick type dressing or plastic wrap



116. For an unconscious patient with abdominal injuries, You should:

- A. Be prepared to commence CPR if patient stops breathing
- B. Ensure the patient is placed into the recovery position taking care to support the abdomen
- C. Monitor the patient for response, airway, normal breathing while waiting for an ambulance
- D. All of the above

DROWNING

117. You find a child face down in a backyard pool. You should:

- A. Remove child from the water carry with head downwards to help drainage of fluid
- B. Be prepared to commence CPR if child stops breathing
- C. Place in recovery position in the event of regurgitation and vomiting
- D. All of the above
- 118. Vomiting and regurgitation is common during resuscitation and after care management of a patient. This may be due to incorrect resuscitation technique or may be unavoidable
- A. True. B. False

FIRST AID FOR CHILDREN

119. When providing first aid treatment to a young child, consent must be obtained from:

- A. The child himself
- **B.** From child's doctor
- C. Parents/ Legal guardian if they are present at the scene
- **D.** None of the above

120. Under the Education and Care Services National Law, a canter-based service should have:

- **A.** All staff members with current approved First aid qualification
- **B.** At least one staff member or nominated supervisor with current approved First aid, Anaphylaxis and Asthma training
- **C.** At least one staff member with current CPR qualification only

121. After a traumatic event, a pre-school age child may experience the following behavior:

- A. Sleep difficulties and the return of bedwetting
- B. Repeatedly talking about or play acting the traumatic event
- C. Loss of appetite or over eating
- D. All of the above

122. How would you talk with children after they have experienced an emotional even or trauma?

- A. Don't talk to them about it so they can just forget it quickly
- **B.** Be honest and use language that a child can understand to explain the basic facts, giving them a chance to ask questions
- C. Tell them not to think about it or to put it out of their minds
- D. Leave it to the child's parents / carers to talk to them

123. If a child has a head injury, seek medical assistance immediately if:

- A. The child becomes unconscious
- **B.** The child vomits several times
- C. The child is confused, drowsy and doesn't respond to your voice
- **D.** All of the above



124. Serious incidents involving children are to be documented and reported to:

- A. The Regulatory Authority
- **B.** The supervisor / principal
- C. Parents / Guardian
- D. All the of the above

125. The normal breathing rate per minute for an infant is:

- A. 16 -20 breaths / min
- B. 20 25 breaths / min
- **C.** 30 50 breaths / min

126. An infant has a severe airway obstruction (choking) - an ineffective cough you should:

- A. Place the infants head down with the head / neck / shoulders supported on your hand
- B. If possible, hold the mouth open with your fingers
- **C.** Give up to 5 back blows with the heel of your hand between the shoulder blades (checking after each back blow) followed by 5 chest thrusts
- D. All of the above

127. A young child has sand in his eye. You should:

- A. Gently rinse the eye with sterile water
- B. Allow him to rub the eye to hopefully remove the sand
- **C.** Apply antiseptic to the affected area

128. A child in your care has suddenly begun to develop symptoms of Anaphylaxis after eating a snack bar that might have peanuts in it. You must:

- A. Give back blows to clear his airway
- B. Administer EpiPen following ASCIA Action Plan for Anaphylaxis
- C. Call for help as there is no first aid for Anaphylaxis
- **D.** Call parents and ask them to pick up the child

129. You have a child coming to your care with the history of Anaphylaxis and Asthma in past. You should:

- A. Ask parents to provide an Emergency Action Plan for Anaphylaxis/ Asthma and discuss management plan with parents
- B. Decline to accept the child in your service as he has a serious medical condition
- C. Call for help if child develops Anaphylaxis
- D. Do nothing as Anaphylaxis is not a life-threatening condition

130. A child is having a febrile convulsion. You should:

- A. Place the child on a flat surface and protect them from any danger or injury
- **B.** Not forcibly restrain the child or put anything in the child's mouth
- C. Remove any covering or clothes and ensure fresh air circulation
- D. All of the above

131. A child has a bleeding nose. This is best managed by:

- A. Sitting up, leaning backward and pinching the soft part of the nose for about 10 minutes
- **B.** Sitting up, leaning forward and pinching the soft part of the nose for about 10 minutes and apply cold compress around the neck or forehead
- C. Lying flat and pinching the soft part of the nose for about 10 minutes



132. The average heart rate of a child is:

A. 80-120 beats /minute

- B. 60-80 beats/ minute
- C. 100- 160 beats/minute

133. To manage fever (38°C or higher) in young children, You should:

- A. Give cold bath to the child to bring down the temperature
- **B.** Offer smaller amount of fluids but more frequently
- C. Dress them in two extra layers of clothing
- D. Give Aspirin for rapid relief from fever

134. Common signs and symptoms of acute serious illness in infants and children include:

- A. Rapid breathing, weak cry or grunting
- B. Floppy or lethargic
- C. Seizures or fits
- D. Any or all of the above

135. Children and infants with serious illness can deteriorate quickly. You must call for Ambulance if:

- A. Casualty is unresponsive and unconscious
- B. An infection related illness is not improving
- C. You think "something is wrong"
- D. All of the above

136. When communicating with a sick child, You should:

- **A.** Use clear and simple language
- B. Reassure the child and provide a comfortable environment for communication
- C. Use age-appropriate methods of communication
- D. All of the above

137. Vomiting and Diarrhea can result in significant fluid loss from the body and may lead to Dehydration. This is best managed by:

- **A.** Offering plenty fluids/ orange juice to the casualty
- **B.** Offering caffeinated drinks to the casualty
- C. Offering high protein drinks to the casualty
- **D.** Do nothing and call for help (000)

138. A rescuer needs to consider the anatomical and physiological differences between adults and children when providing first treatment because:

- A. A child's airway is narrower and is more prone to be blocked by secretions/blood.
- B. Infants and children have higher respiratory and heart rates than adults
- C. Infants are nose breathers so any nasal obstruction can cause respiratory distress
- D. All of the above

139. Cardiac Arrest should be suspected in an infant or a child if:

- A. They are having a rapid pulse
- B. Unresponsive and not breathing normally
- C. Having more than one breath in 10 second duration
- D. All of the above



140. A superficial frost bite on fingers is best managed by:

- **A.** Rubbing the frozen tissue
- B. Using radiant heat to re-warm the affected fingers
- C. Re-warm the affected fingers immediately by gently placing them in the opposite armpit
- **D.** Breaking the blisters