1. **The U.S. Department of Transportation has issued specifications for all of the following types of ambulances EXCEPT:**
   a. Type III.
   b. Type I.
   c. Type IV.
   d. Type II.

2. **Which of the following is the primary reason why ambulances should have two oxygen supply systems?**
   a. To provide oxygen to two patients at one time
   b. To provide oxygen to the patient in the event of vehicle breakdown
   c. To ensure a supply of oxygen for long-distance transports
   d. To have a backup system in the event of failure of the primary system

3. **Occlusive dressings must be carried on an ambulance to treat which of the following injuries?**
   a. Amputations
   b. Tension pneumothorax
   c. Impaled object in the eye
   d. Open pneumothorax

4. **The medical acronym EMD stands for which of the following?**
   a. Emergency Medical Director
   b. Emergency Medical Doctor
   c. Emergency Medical Driver
   d. Emergency Medical Dispatch

5. **Safety studies have shown that drivers of other vehicles do not usually see or hear ambulances or other emergency vehicles until they are within ________ feet of it.**
   a. 50 to 100
   b. 200 to 250
   c. 150 to 200
   d. 100 to 150

6. **Tests have shown that ________ ambulance operators tend to speed up by 10 to 15 miles per hour when the siren is sounding.**
   a. privately employed
   b. younger
   c. inexperienced
   d. None of the above

7. **Regarding the use of emergency sirens, which of the following is FALSE?**
   a. Dense shrubbery may block the sound of the siren.
   b. The sound of the siren may increase the patient's anxiety.
   c. Ambulance operators are not affected by siren noise.
   d. EMTs should assume that other drivers cannot hear the siren.

8. **Regarding ambulance warning devices, which of the following statements is NOT true?**
   a. Four-way flashers should not be used as emergency lights.
   b. The large lights on the outermost corners of the ambulance box should blink alternately.
   c. In most states it is illegal to drive at night with only one headlight.
   d. The use of strobes is controversial.
9. The process of combining the patient and patient-carrying device into a unit ready for moving and transporting the patient is called:
   a. loading.
   b. wrapping.
   c. immobilizing.
   d. packaging.

10. A patient-carrying device should have at least _______ straps to hold the patient securely.
    a. 3
    b. 5
    c. 1
    d. 2

11. Which of the following transport positions is indicated for the patient in shock?
    a. Legs raised 8 to 12 inches.
    b. Left lateral recumbent
    c. Sitting
    d. Recumbent

12. Which of the following is true concerning disinfection?
    a. A solution of 1 part household bleach to 100 parts water is an effective disinfectant for health care purposes.
    b. High level disinfection destroys all sources of infection.
    c. A low-level disinfectant will kill germs on ambulance floors and walls.
    d. All of the above

13. Which of the following is NOT essential equipment on an ambulance?
    a. An automatic transport ventilator
    b. Portable oxygen tanks
    c. Pediatric oxygen administration devices
    d. Portable suction unit

14. Chemical cold packs are carried on the ambulance for treatment of which of the following?
    a. Seizures
    b. Musculoskeletal injuries
    c. Snake bites
    d. Abdominal pain

15. Which of the following is a purpose for carrying sterilized aluminum foil on an ambulance?
    a. To control major arterial bleeding
    b. To keep a newborn warm
    c. To care for amputated parts
    d. None of the above

16. Most state statutes allow an emergency vehicle operator to do which of the following on emergency calls?
    a. Drive around lowered cross-arms at a railroad crossing
    b. Exceed posted speed limits if life and property are not endangered
    c. Be exempt from liability in the event of a collision
    d. Pass a stopped school bus with its red flashers on

17. Which of the following contributes most significantly to the occurrence of ambulance crashes?
    a. Time of day
    b. Size of the vehicle
    c. Speed of the vehicle
    d. Weather conditions
18. **Operators of emergency vehicles must drive with the safety of others in mind. This is known as driving:**
   a. with due regard.
   b. defensively.
   c. as a public servant.
   d. with emergency privilege.

19. **Which of the following is NOT a responsibility of the Emergency Medical Dispatcher?**
   a. Prioritizing calls that come in
   b. Providing medical direction to the responding units
   c. Coordinating with other public safety agencies
   d. Providing emergency instructions to the caller

20. **You are at the scene of a vehicle collision and have found that there is one patient who is in stable condition. At this point, the call can be categorized as:**
   a. no longer a true emergency.
   b. triaged.
   c. an unfounded call.
   d. a non-incident.

21. **Full immobilization of a trauma patient, including placing a cervical collar and securing the patient to a backboard, should take place at which of the following points in time?**
   a. Before moving the patient to the ambulance
   b. Before the primary assessment
   c. En route to the hospital
   d. After checking for cervical range of motion

22. **At which point should you complete your patient care report?**
   a. As soon as you are free from patient duties
   b. En route to the hospital
   c. As soon as you arrive at the hospital
   d. At the end of your shift

23. **Which of the following should be checked with the vehicle engine turned off?**
   a. Dash-mounted gauges
   b. Windshield wiper operation
   c. Warning lights
   d. Battery

24. **When heading back to quarters, on what should you place your emphasis?**
   a. Documentation
   b. Beginning to reorganize the ambulance
   c. A safe return
   d. Refueling the ambulance for the next call

25. **Which of the following is optional equipment?**
   a. Flashlights
   b. Infant oxygen masks
   c. Disinfectant solution
   d. Lubricating jelly

26. **Which phase of an ambulance call is characterized by receiving a report from the off-going shift and checking the functionality of equipment?**
   a. Preparing for the ambulance call
   b. Receiving and responding to a call
   c. Transferring the patient to the ambulance
   d. Terminating the call
27. While staffing an emergency services dispatch center, an Emergency Medical Dispatcher (EMD) receives a call from someone who is very upset and screaming that her friend was just shot. Which of the following would the EMD need to do in this situation?
   a. Determine the location of the shooter.
   b. Ask the caller for her phone number.
   c. Provide the caller with information on local hospitals.
   d. Notify the victim's family of the incident.

28. You are responding at emergency status to a vehicle collision in your ambulance. As you approach an intersection with a red light in your direction, you approach cautiously, come to a complete stop at the intersection, ensure all other drivers can see you, and slowly ease your way through the intersection. These actions describe your abilities to:
   a. follow state laws regarding emergency vehicle operations.
   b. ensure your right to proceed through a red light due to the established emergency.
   c. proceed with due regard for the safety of all drivers on the road.
   d. predict the travel path of other drivers who have the right-of-way.

29. When responding to an emergency in an authorized vehicle while functioning as an EMT for an authorized emergency service, the actions you take while driving are:
   a. covered by your service's insurance carrier.
   b. subject to laws that govern all drivers.
   c. allowable, provided you do not exceed 15 mph above the posted speed limit.
   d. not likely to result in an investigation in the event of a collision.

30. After responding to the scene of a patient complaining of difficulty breathing, you and your partner determine that the patient's condition is not life threatening based on a thorough assessment. You should transport the patient to an appropriate medical facility:
   a. with the emergency lights on, but without activating the siren.
   b. with the emergency lights off, but activating the siren when traffic builds.
   c. with both lights and siren activated.
   d. with neither lights nor siren activated.

31. When deciding whether or not to drive to the hospital with lights and siren activated for any patient, the driver should consider:
   a. the patient's past medical history.
   b. potential risks of making the patient's condition worse.
   c. the patient's preference for lights and siren.
   d. how many calls are waiting for an available ambulance.

32. Police escorts of ambulances driving at emergency status are typically discouraged because:
   a. police officers are not accustomed to driving an ambulance.
   b. there is no guarantee that the police officer knows where the call is located.
   c. drivers who pull over for the police officer often pull back in front of the ambulance.
   d. ambulances do not move as fast as police cruisers.

33. When arriving at the location of a motor vehicle collision on an interstate highway, you should position the ambulance so that:
   a. there is a safe area between the damaged vehicles and traffic behind the scene.
   b. there is a safe area beyond the damaged vehicles.
   c. you are nearest to the command post for easy communications with the incident commander.
   d. there is a fire truck between you and oncoming traffic.
34. Which of the following is the correct order of operations when transferring a stable patient from his or her house to the ambulance?
   a. Package the patient for transport, select the proper patient-carrying device, move the patient to the ambulance, and load the patient into the ambulance.
   b. Package the patient for transport, move the patient to the ambulance, select the proper patient-carrying device, and load the patient into the ambulance.
   c. Select the proper patient-carrying device, move the patient to the ambulance, package the patient for transport, and load the patient into the ambulance.
   d. Select the proper patient-carrying device, package the patient for transport, move the patient to the ambulance, and load the patient into the ambulance.

35. You have transported a stable patient with complaints of having abdominal pain for the last three weeks to the hospital. On arrival, you notice the emergency department is very busy and there are no empty beds to be found. You have attempted to get the attention of a hospital staff member to transfer the patient, but all are currently helping other patients. Your partner tells you to take the patient to the waiting room and leave him since the dispatcher of your service is holding several serious calls. What could possibly happen to you if you leave the patient in this fashion?
   a. Nothing; there are other people who are in need of an ambulance.
   b. Nothing, provided that your supervisor authorizes this action.
   c. You could possibly be charged with abandonment.
   d. You could possibly be charged with false imprisonment.

36. You have transported a patient to the emergency department and are in the process of cleaning the ambulance while your partner is completing all required paperwork. At what point is the final phase of an ambulance call complete?
   a. As soon as you put the stretcher back in the ambulance with a clean sheet and you notify your dispatch center you are available.
   b. As soon as your partner completes the patient care report and you are restocking the supplies used during the call.
   c. As soon as you get back to the station and notify your dispatch center you are in quarters.
   d. After your partner completes all required paperwork and you have the ambulance completely cleaned and restocked.

37. Which of the following situations may warrant the use of helicopter transport from the scene to a medical facility?
   a. The distance to the medical facility is 15 minutes away.
   b. The patient is in cardiac arrest.
   c. The patient is located in a remote area.
   d. The patient may go into shock shortly.

38. What is an appropriate-sized landing zone for a helicopter?
   a. 25 feet by 25 feet
   b. 50 feet by 50 feet
   c. 75 feet by 75 feet
   d. 100 feet by 100 feet
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1. c. Type IV.
2. a. To provide oxygen to two patients at one time
3. d. Open pneumothorax
4. d. Emergency Medical Dispatch
5. a. 50 to 100
6. c. inexperienced
7. c. Ambulance operators are not affected by siren noise.
8. b. The large lights on the outermost corners of the ambulance box should blink alternately.
9. d. packaging.
10. a. 3
11. a. Legs raised 8 to 12 inches.
12. c. A low-level disinfectant will kill germs on ambulance floors and walls.
13. a. An automatic transport ventilator
14. b. Musculoskeletal injuries
15. b. To keep a newborn warm
16. b. Exceed posted speed limits if life and property are not endangered
17. c. Speed of the vehicle
18. a. with due regard.
19. b. Providing medical direction to the responding units
20. a. no longer a true emergency.
21. a. Before moving the patient to the ambulance
22. a. As soon as you are free from patient duties
23. d. Battery
24. c. A safe return
25. b. Infant oxygen masks
26. a. Preparing for the ambulance call
27. b. Ask the caller for her phone number.
28. a. proceed with due regard for the safety of all drivers on the road.
29. b. subject to laws that govern all drivers.
30. d. with neither lights nor siren activated.
31. b. potential risks of making the patient's condition worse.
32. c. drivers who pull over for the police officer often pull back in front of the ambulance.
33. b. there is a safe area beyond the damaged vehicles.
34. d. Select the proper patient-carrying device, package the patient for transport, move the patient to the ambulance, and load the patient into the ambulance.
35. c. You could possibly be charged with abandonment.
36. d. After your partner completes all required paperwork and you have the ambulance completely cleaned and restocked
37. c. The patient is located in a remote area.
38. d. 100 feet by 100 feet