EMT Epinephrine Module Examination

- 1. A 71 year old man with a known bee allergy is stung. He has a history of myocardial infarction and takes a beta blocker. He has an itching rash, extensive wheezing, is using accessory muscles to breathe, and reports that he is having a hard time breathing. Epinephrine administration is indicated. However, you recognize that he is high risk for complications from epinephrine. Base hospital contact would be difficult to establish. You should:
 - a. Administer epinephrine
 - b. Not administer epinephrine
 - c. Wait 30 minutes for a radio patch to ask if you should administer epinephrine
- 2. A 5 year old has a severe allergic reaction to a peanut. You administer epinephrine and observe the patient. He is worsening. You should:
 - a. Administer a second dose in 5 minutes
 - b. Administer a second dose in 10 minutes
 - c. Administer a second dose in 15 minutes
 - d. Not administer a second dose
- 3. A 23 year old has a severe allergic reaction to shrimp. You administer epinephrine and observe the patient. He feels and looks a little better, but still has some wheezing and throat tightness. You should:
 - a. Administer a second dose in 5 minutes
 - b. Administer a second dose in 10 minutes
 - c. Administer a second dose in 15 minutes
 - d. Not administer a second dose
- 4. A 41 year old has a severe allergic reaction to a new medication. You administer epinephrine and observe the patient. He feels completely better 10 minutes after oxygen and a single dose of epinephrine and would like to leave to go hiking. He no longer has any symptoms or physical exam findings of allergic reaction.
 - a. He is ok to treat and release at this time
 - b. You should recommend transport to the hospital and initiate the AMA (against medical advice) process if he refuses

- 5. As you withdraw the plunger just prior to injecting epinephrine, blood flows into the syringe. Your next step is to:
 - a. Inject epinephrine at the current site
 - b. Select a different injection site
- 6. What is the concentration of the epinephrine ampule?
 - a. 1 ml = 3 mg
 - b. 1mg = 1mL
 - c. 1mg = 2mL
 - d. 3mg = 1mL
- 7. Epinephrine dose in a 6 year-old child is?
 - a. 0.03 ml
 - b. 0.3 ml
 - c. 3.0 ml
 - d. 3 tablespoons
- 8. A 16 year-old boy who says he is very allergic to bee stings and was stung on the hand 5 minutes ago, approaches you for help. He is anxious and has swelling and redness to that part of his hand but no trouble breathing, no throat discomfort, and an otherwise normal exam, you should:
 - a. Treat as severe allergic reaction with epinephrine now.
 - b. Transport him to a medical facility immediately
 - c. Remove the stinger and observe for worsening
 - d. Release him now as it is obvious he is not having an allergic reaction.
- 9. A 60 year-old man with no past medical history or history of allergen exposure presents with dyspnea and severe wheezing. He has no rash, no itching, and his throat feels normal. Should he receive a dose of epinephrine?
 - a. Yes
 - b. No
- 10. The onset of most life threatening allergic reactions is within:
 - a. A few seconds to 30 minutes.
 - b. 45-60 minutes.
 - c. 2-4 hours following exposure.
 - d. 12-24 hours following exposure.

- 11. A person experiencing itching and swelling around their mouth, tongue and throat 25 minutes after receiving and insect bite should:
 - a. Receive epinephrine 1:1000
 - b. Be observed for further symptoms.
 - c. Be transported to the nearest medical facility.
 - d. All of the above.
- 12. Which of these is an indication to receive epinephrine in the setting of an allergic reaction?
 - a. Nausea and vomiting
 - b. Hives across the body
 - c. Respiratory distress
 - d. Epinephrine should be given if any of these symptoms are present
- 13. All patients receiving epinephrine from an EMT require transport to the hospital
 - a. True
 - b. False
- 14. You have diagnosed a patient with a severe allergic reaction. They are in respiratory distress and have a low blood pressure.
 - a. You must initiate base hospital contact prior to administering epinephrine
 - b. You may administer epinephrine without base hospital contact
- 15. You may AMA/TAR a patient if:
 - a. Patient has a mild local reaction
 - b. Patient was observed at least 30 minutes from onset of exposure and has normal vital signs
 - c. Patient has no history of severe allergic reactions
 - d. Patient was given no medication
 - e. All of the above must be met in order to AMA/TAR
- 16. When breaking the ampule, the ampule is considered a sharp:
 - a. True
 - b. False

- 17. If a patient has an epinephrine autoinjector, you should use that instead of your anaphylaxis kit:
 - a. True
 - b. False
 - c. According to the NPS EMS field manual, you may use the epinephrine autoinjector or your anaphylaxis kit
- 18. A 32 year old man with no history of allergic reactions was eating dinner at a restaurant. He rapidly developed hives, a sensation of throat tightness, and wheezing. His vital signs are normal.
 - a. Epinephrine is indicated at this time
 - b. Epinephrine is not indicated at this time
- 19. A 21 year old woman with a history of severe allergic reactions to fire ants stepped in an ant hill and was bitten several times on the ankle. Currently she has redness, swelling, pain, and itching on the ankle. There are some hives on her thigh. She has **NO** sensation of respiratory distress, wheezing, or throat swelling. Her vital signs are normal.
 - a. Epinephrine is indicated at this time
 - b. Epinephrine is not indicated at this time
- 20. A 68 year old woman with a long history of COPD presents in respiratory distress, with wheezing, retractions, and difficulty speaking. This feels like her COPD exacerbations. She has no chest pain. Her vital signs are normal.
 - a. Epinephrine is indicated at this time
 - b. Epinephrine is not indicated at this time