



Provider Refresher Course BLS Quiz

1. According to the AHA guidelines, symptomatic pediatric bradycardia is considered an ARREST rhythm.
 - a. True
 - b. False
2. What is the recommended treatment for wide-complex tachycardia in hemodynamically **unstable** children?
 - a. Antiarrhythmic drugs
 - b. Direct current synchronized cardioversion
 - c. Beta-blockers
 - d. Calcium channel blockers
3. When managing a pediatric patient experiencing hemorrhage, what is the primary and most crucial initial step?
 - a. Hemorrhage control
 - b. Defibrillation
 - c. Place in a C-collar
 - d. Whole blood
4. What is the diagnostic method used to identify a complete heart block in children?
 - a. Pulse check
 - b. ECG
 - c. Pulse oximetry
 - d. Electroencephalogram
5. What is the danger of hyperventilation during cardiac arrest?
 - a. Hypertension
 - b. Reduction of blood flow due to intrathoracic pressure
 - c. Vomiting
 - d. Hypercarbia



6. What are the main components of high-quality CPR?
 - a. Adequate chest compression depth
 - b. Optimal chest compression rate
 - c. Minimizing interruptions in CPR
 - d. All of the above

7. What is the ideal compression rate for CPR in pediatric patients?
 - a. 60 beats per minute
 - b. 70 beats per minute
 - c. 90 beats per minute
 - d. 110 beats per minute

8. What structures in the throat can swell from smoke inhalation?
 - a. Vocal cords
 - b. Arytenoid cartilages
 - c. Epiglottis
 - d. Tonsils

9. Why is early airway management important in smoke inhalation cases?
 - a. To prevent arytenoid cartilage swelling
 - b. To clear the soot from the oropharynx
 - c. To prevent vocal cord damage
 - d. So that a nasogastric tube can be placed easily

10. What is a BLS item you can place in a seizing child to help with ventilation?
 - a. OPA
 - b. Nasal cannula
 - c. Nonrebreather
 - d. ET tube



11. What technique can help open an infant's airway?
 - a. A shoulder roll
 - b. A pillow under the head
 - c. C-collar
 - d. NPA

12. An 18-month-old was found vomiting after drinking a clear liquid in the garage. His initial vitals are as follows: HR: 130, BP: 90/50, SaO₂: 93% on RA, RR: 50. What is the next appropriate step?
 - a. Intubate immediately
 - b. Administer supplemental O₂
 - c. Give activated Charcoal
 - d. Give an albuterol nebulizer treatment

13. How many kids go into cardiac arrest each year in the United States?
 - a. 5,000
 - b. 10,000
 - c. 15,000
 - d. 20,000

14. What is the recommended resuscitation sequence for pediatric cardiac arrest?
 - a. ABC (Airway, Breathing, Chest compressions)
 - b. CAB (Chest compressions, Airway, Breathing)
 - c. BAC (Breathing, Airway, Chest compressions)
 - d. ACB (Airway, Chest compressions, Breathing)

15. In 2020, the AHA changed their recommendation for ventilation after placement of an advanced airway to 20-30 breaths per minute. What is the basis of this recommendation?
 - a. A randomized controlled trial
 - b. Expert opinion
 - c. A pig study
 - d. An observational study of 47 children in the ICU, 74% of which were not in arrest (they had bradycardia).



16. What is the recommended method for opening the airway in trauma patients during resuscitation?
- Jaw-thrust maneuver
 - Head tilt-chin lift maneuver
 - Modified Sellick maneuver
 - Modified Heimlich maneuver
17. What is the main reason pediatric patients go into cardiac arrest?
- Toxins
 - Respiratory etiology
 - Drowning
 - Abuse
18. What would be the most appropriate course of action to take for a 6-year-old diabetic child who has a blood sugar of 50 and is awake but appearing tired?
- Place an Epi-pen Jr. to the lateral thigh
 - Start CPR
 - Provide oral glucose gel
 - Call for ALS backup so they can place an IV and provide D10W
19. You arrive at an emergency situation and find a four-month-old patient experiencing cardiac arrest. Unfortunately, you only have an Automated External Defibrillator (AED) equipped with adult pads. What is the most appropriate next course of action?
- Refrain from using the AED due to the age of the patient.
 - Immediately call for ALS backup so they can bring the necessary ALS monitor.
 - Use the AED with adult pads and settings due to the urgency of the situation.
 - Assume that ventricular fibrillation (VF) is not a possibility in a 4-month-old, hence an AED is unnecessary.
20. Upon arriving at the scene, you encounter a three-year-old child with a fever who is actively having a seizure and exhibiting ineffective respiratory effort. What is the most appropriate immediate action to take?
- Request Advanced Life Support (ALS) backup
 - Open the child's airway, administer oxygen, consider the use of an oropharyngeal airway (OPA) and a Bag-Valve-Mask (BVM) resuscitator
 - Check the child's blood glucose level
 - Apply ice packs to the child's body



21. What is the role of end-tidal CO₂ monitoring during resuscitation?
- a. It provides feedback on the quality of CPR and may be an early sign of ROSC
 - b. It helps determine the need for advanced airway placement
 - c. It guides the administration of specific medications during resuscitation
 - d. It predicts the likelihood of survival to hospital discharge
22. Which of these may signal ROSC in a patient you are resuscitating?
- a. O₂ Sat of 80% during compressions
 - b. Palpable femoral pulse
 - c. A spike and sustained elevation of ETCO₂
 - d. Systolic blood pressure of 60 mmHg
23. What is the most common type of pediatric shock?
- a. Cardiogenic shock
 - b. Hypovolemic shock
 - c. Distributive shock
 - d. Obstructive shock
24. You are part of a Basic Life Support (BLS) crew, and your six-year-old patient is exhibiting symptoms of fever and low blood pressure. The closest hospital is 45 minutes away. What is the most suitable immediate action to take under these circumstances?
- a. Proceed to transport the child using code 3 to the nearest suitable hospital.
 - b. Administer intramuscular epinephrine to the child.
 - c. Request an Advanced Life Support (ALS) unit to provide fluid resuscitation and pressors.
 - d. Check the child's blood glucose level.
25. Anaphylactic shock is an example of?
- a. Hypovolemic shock
 - b. Distributive shock
 - c. Cardiogenic shock
 - d. Hemorrhagic shock