

CHAPTER 32 QUIZ

Write the letter of the best answer in the space provided.

- _____ 1. Among patients over age 65, almost all have:
A. arthritis
B. high blood pressure
C. diabetes
D. hearing impairment
- _____ 2. Of the following, the least likely reason for an EMS unit to be called by an older patient is:
A. cardiac and respiratory problems.
B. neurological problems.
C. injuries from a fall.
D. injuries sustained in a motor vehicle crash.
- _____ 3. Abnormal heart rhythms can make people over age 65 more prone to:
A. weight loss.
B. hypothermia.
C. pneumonia.
D. falls.
- _____ 4. Clouding and thickening of the eye lenses in an older patient is the result of:
A. trauma
B. cataracts
C. certain eyedrops
D. stroke
- _____ 5. The best way to establish an airway in a geriatric patient with an arthritic neck is:
A. head tilt, chin lift.
B. chin flex.
C. "blind" finger sweep.
D. modified jaw thrust.
- _____ 6. If an EMT-B is unable to ventilate a geriatric patient he or she should:
A. call 9-1-1.
B. start CPR.
C. look to see if there are dentures obstructing.
D. apply full-concentration oxygen.
- _____ 7. As people age, their systolic blood pressure has a tendency to:
A. stay the same.
B. decrease.
C. increase.
D. go up and down.
- _____ 8. In geriatric patients, the most common injury associated with a fall is to the:
A. neck.
B. proximal tibia.
C. hip or proximal femur.
D. distal radius.
- _____ 9. If an EMT-B observes a slow, steady decline in a geriatric patient he or she should:
A. reassess the patient.
B. immobilize the spine immediately.
C. take vital signs again in 15-20 minutes.
D. only reassure the patient.
- _____ 10. A significant fear among geriatric patients who are injured is:
A. bleeding.
B. pain.
C. loss of independence.
D. use of medication.

IN THE FIELD

Read the following real-life situation. Then answer the questions that follow.

You have been dispatched to an independent living center for the elderly. En route to the call your partner complains that driving is difficult because the roads are covered with snow. Before you enter the living center you grab an extra blanket and throw it on the wheeled cot. Your partner turns to you and says, "The temperature must be in the single digits." You enter the patient's apartment and find a woman in her 70s sitting in a chair with a blanket over her. Her friend who lives in the next apartment tells you that the patient was found in this chair about half an hour ago and they put a blanket on her and called 9-1-1. The custodian from the building is there and says that he was called because the apartment was cold and reports the temperature to be 50°F. The patient is shivering and when you ask questions the responses are confused.

1. What action(s) should you take at this time?

You start to talk to the patient and realize that she has trouble hearing and is confused. You position yourself at eye level and speak slowly and clearly, giving the patient time to respond. You know that the airway is open and breathing is slightly labored at a rate of 24. Her pulse is 80 and irregular. The skin is pale and cold. Your partner starts to take a blood pressure. The patient does not give you a good response when taking a SAMPLE history but the next-door neighbor gives you a "Vial of Life" that contains an overview of her medical history including medications and allergies. You and your partner decide that you want to start packaging the patient for transport. The neighbor says she will call the daughter and tell her that you are taking her mother to the hospital.

2. What action(s) should you take at this time?

CHAPTER 32 REVIEW

Write the word or words that best complete each sentence in the space provided.

1. Older patients are at least _____ as likely to use EMS as young patients.
2. With an elderly patient who is determined to be unstable vitals signs should be taken every _____ minutes.
3. In assessing the circulation of an older patient, an EMT-B may notice that the pulse is often _____.
4. When an older patient replaces lost circumstances with imaginary ones, it is called _____.
5. In assessing the chest and abdomen of geriatric patients, an EMT-B should keep in mind their _____ to pain.
6. A number of older people fall because of _____ heart rhythms.
7. An EMT-B can help prevent falls by looking for _____ when they enter an older person's home.
8. An elderly person can be abused or neglected in three ways: _____, _____, and _____.
9. Two common causes of altered mental status in the elderly are: _____ and _____.

TERRORISM AND EMS TRUE OR FALSE

Indicate if the following statements are true or false by writing T or F in the space provided.

- _____ 1. Older patients represent a much lower proportion of patients transported by EMS as compared to the younger population.
- _____ 2. The most common reason for EMS to be called for an elderly patient is injuries sustained in a motor vehicle crash.
- _____ 3. The condition of an elderly patients's house may give an EMT-B important clues to the patient's physical and mental condition.
- _____ 4. Older patients have a lower tolerance to pain.
- _____ 5. A number of older people fall because of abnormal heart rhythms.
- _____ 6. The hip or proximal femur is commonly fractured in falls of the elderly, especially women.
- _____ 7. Depression and suicide are not common among the elderly.
- _____ 8. How well an elderly patient keeps house is not a concern when the EMT-B is doing the scene size-up.
- _____ 9. Dizziness may be a symptom of internal blood loss with the geriatric patient.
- _____ 10. When a geriatric patient has shortness of breath the EMT-B needs to have a high index of suspicion that it might be a chief complaint for a myocardial infarction.

Chapter 32 Answer Key

HANDOUT 32-1: Chapter 32 Quiz

- | | | |
|------|------|-------|
| 1. A | 5. D | 8. C |
| 2. A | 6. C | 9. A |
| 3. D | 7. C | 10. C |
| 4. B | | |

HANDOUT 32-2: In the Field

1. The scene size-up is important. The patient is in a cold environment and probably has been for some time and is showing, in part, signs of hypothermia because of the shivering. In addition, you noticed her confusion. The patient may need another blanket and the custodian should be asked to get the apartment warmed up if this isn't being done already. As with every patient the initial assessment is essential and the ABCs must be assessed. Determine if this is a priority patient in need of rapid transport. As time permits and depending on the decision to transport quickly, a SAMPLE history, a physical exam, and a baseline set of vital signs should be obtained.
2. The patient should be placed on oxygen by non-rebreather. The patient needs to be protected from further exposure to the cold. Wrap the patient in multiple layers to ensure that she is not aggravated by the cold weather when she goes outside and gets loaded into the ambulance. As you are preparing to move the patient your partner reminds you that hypothermia can make a patient more prone to ventricular fibrillation and that the move needs to be done as gently as possible. The AED is kept close by. You talk to the patient to tell her what is being done and why. You let her know that her daughter is being notified. You take the information from the Vial of Life with you for the hospital staff. En route to the hospital you continue to monitor vital signs. As you arrive at the hospital the patient seems to be less confused and is shivering less. You give a complete patient report to the triage nurse.

HANDOUT 32-3: Review

1. twice
2. five
3. irregularly irregular
4. confabulation
5. decreased sensitivity
6. abnormal curvature
7. abnormal
8. physical
psychological
financial
9. Any two of these:
 - medications
 - hypoglycemia
 - infection
 - hypothermia
 - stroke

HANDOUT 32-4: EMS Response to Terrorism True or False

- | | | |
|------|------|-------|
| 1. F | 5. T | 8. F |
| 2. F | 6. T | 9. T |
| 3. T | 7. F | 10. T |
| 4. F | | |

