

Students are encouraged to use this exam to become familiar with the style of questions on the TNCC exam. Use the Practice Exam with Rationale and your provider manual to self-remediate and study.

1. What is the key to a high-performance trauma team?
 - a. Individual goals
 - b. Use of TeamSTEPPS
 - c. Identification of a single decision maker
 - d. Effective communication

2. When obtaining a history for an injured patient, understanding the kinematic concepts associated with the mechanism of injury and energy transfer can initially assist the trauma provider in:
 - a. Evaluating and anticipating the types of injury that may be present
 - b. Deciding whether law enforcement should be notified
 - c. Determining needed laboratory tests
 - d. Predicting the need for a surgical procedure

3. The major preventable cause of death in the trauma patient is:
 - a. Airway compromise
 - b. Ineffective ventilation
 - c. Secondary head injury
 - d. Uncontrolled hemorrhage

4. The across-the-room observation step in the initial assessment provides the opportunity to:
 - a. Assess for uncontrolled internal hemorrhage
 - b. Accurately triage the patient
 - c. Reprioritize circulation before airway or breathing
 - d. Activate the trauma team

5. Which of the following accurately describes ventilation principles associated with a bag-mask device?
 - a. Ventilate at a rate of 10 to 12 breaths/minute
 - b. Deliver 100% oxygen
 - c. Compress the bag-mask device completely
 - d. Maintain the oxygen saturation level between 92% and 94%

6. Which of the following is the best measure of the adequacy of cellular perfusion and helps to predict the outcome of resuscitation?
 - a. End-tidal carbon dioxide
 - b. Hypoxia
 - c. Base deficit
 - d. Oxygen saturation

7. What is a safe pharmacological alternative to opioids for rib fracture pain management in the anticoagulated patient?
 - a. Corticosteroids
 - b. Intercostal nerve blocks
 - c. Nonsteroidal anti-inflammatory drugs
 - d. Epidural anesthetics

8. In a patient with severe traumatic brain injury, hypocapnia causes:
 - a. Respiratory acidosis
 - b. Metabolic acidosis
 - c. Neurogenic shock
 - d. Cerebral vasoconstriction

9. A patient with a knife injury to the neck has an intact airway and is hemodynamically stable. He complains of difficulty swallowing and speaking. Further assessment is indicated next for which of the following conditions?
 - a. Damage to the spinal cord
 - b. An expanding pneumothorax
 - c. Laceration of the carotid artery
 - d. Injury to the thyroid gland

10. What is the appropriate technique for palpating the pelvis for stability?
 - a. Apply gentle pressure over the iliac crests downward and laterally
 - b. Apply gentle pressure over the iliac crests downward and medially
 - c. Apply firm pressure over the iliac crests downward and laterally
 - d. Apply firm pressure over the iliac crests downward and medially

11. A patient with a spinal cord injury at C5 is being cared for in the emergency department while awaiting transport to a trauma center. Which of the following represents the highest priority for ongoing assessment and management?
 - a. Maintain adequate respiratory status
 - b. Administer balanced resuscitation fluid
 - c. Perform serial assessments of neurologic function
 - d. Maintain core temperature

12. Based on proper bleeding control techniques, what is the first step to stop the bleeding of a penetrating injury to the lower extremity?
 - a. Elevate the extremity to the level of the heart
 - b. Initiate direct pressure
 - c. Apply a tourniquet
 - d. Cover the open wound with sterile saline dressings

- 13.** Treatment for frostbite includes:
- Warm the affected part slowly over 30 to 60 minutes
 - Use gentle friction to improve circulation
 - Administer tissue plasminogen activator
 - Leave blisters intact
- 14.** A 30-week pregnant trauma patient's vital signs include a blood pressure of 94/62 mm Hg and a heart rate of 108 beats/minute. Fetal heart tones are 124 beats/minute. The emergency nurse interprets the patient's hemodynamic findings as an indication of which of the following?
- Decompensated shock
 - Normal vital signs in pregnancy
 - Abruptio placentae
 - Supine hypotension syndrome
- 15.** While performing an assessment on a 13-month-old involved in a motor vehicle collision, the nurse identifies which of the following findings from the patient as a potential sign of mental status changes?
- Sunken fontanel
 - Crying, but consolable
 - Hyperglycemia
 - Cooperation with the assessment
- 16.** What is the best position for maintaining an open airway in the bariatric patient?
- Prone
 - Supine
 - Reverse Trendelenburg
 - Right lateral recumbent
- 17.** The nurse is obtaining a history for a patient who presents following sexual assault. This history is completed using which of the following techniques?
- Bring the family in to the interview room
 - Use direct quotes to record information
 - Obtain information specific to the assault, not what happened afterward
 - Provide food and drink before creating a rapport
- 18.** A trauma nurse cared for a child with devastating burns two weeks ago. She called in sick for a couple of days and is now back working on the team. Which of the following behaviors would indicate this nurse is coping well?
- She is talking about taking the emergency nursing certification examination
 - She keeps requesting to be assigned to the walk-in/ambulatory area
 - She is impatient and snaps at coworkers
 - She is thinking about transferring out of the emergency department

- 19.** Following a bomb explosion, fragmentation injuries from the bomb or objects in the environment are examples of which phase of injury?
- Primary
 - Secondary
 - Tertiary
 - Quaternary
- 20.** A patient fell two weeks ago, striking his head. He came to the emergency department with a persistent headache and nausea. He was diagnosed with a small subdural hematoma and has been in the ED for 24 hours awaiting an inpatient bed. The night shift nurse reports that he has been anxious, restless, and shaky. He vomited twice during the night. He tells the day shift nurse that he couldn't sleep because a young child kept coming into his room. What is a likely cause for these signs and symptoms?
- Increased intracranial pressure
 - Alcohol withdrawal
 - Rhabdomyolysis
 - Pulmonary embolus