

- 6) What are “LDL” and “HDL”?

- 7) How much cholesterol can the body produce daily?

- 8) Name three things you can do for yourself to reduce the risk of cardiac arrest?

- 9) Which cardiac dysrhythmia has a high survival potential?

- 10) What’s the most important intervention to be performed in a cardiac arrest patient?

- 11) What is the “Chain of Survival”? What is it composed of?

- 12) What is the minimum and maximum number of chest compressions considered to be a “best practice” when performing CPR?

- 13) Why does the chest need to fully recoil after each compression during CPR?

14) Why are “16 seconds” and “3 seconds” important numbers to know in relation to CPR?

15) How often should you ventilate a cardiac arrest patient?

16) What percentage of SCEMSS call volume accounts for cardiac arrest?

17) What is ROSC? What are the criteria for induced therapeutic hypothermia?

18) What does recent research suggest about prehospital use of induced therapeutic hypothermia?

19) During the 6-12 hour intermediate phase after ROSC, what is the primary cause of death?

20) Based on the AHA 2010 Updates data, what are the percentages of Hospital Discharge and Death Rate?

21) Medical Control is _____

22) Do not give ASA to a suspected cardiac patient this is currently taking what drug?

23) What are contraindications to the administration of NTG?

24) On a 12-lead EKG, which three leads will indicate if a patient is having an Inferior Wall MI?

25) What are the cardiogenic effects of Dopamine?

26) For what dysrhythmia, according to Region VII SCEMSS SMO's, is Lidocaine indicated? What are the dosages?

27) What medication can be used to reduce pain associated with Cardioversion?

28) Prior to performing a Cardioversion on a patient, what must you do with the cardiac monitor? That is, what button must you push first?

29) What are 5 underlying causes of PEA/Asystole?

30) Why is important to perform a 12-lead EKG on a bradycardic patient before administering Atropine?