Self-Aid and Buddy Care (SABC) EOC Practice Test (Sample)

Study Guide

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Questions

1. Why is it necessary to seek higher medical care after providing SABC?

A. To ensure the casualty feels supported

B. To provide definitive treatment not covered by SABC

C. To document the incident for legal purposes

D. To prepare the casualty for discharge

2. Which vital sign should be checked to assess a casualty's breathing?

A. Blood pressure.

B. Pulse rate.

C. Respiratory rate.

D. Temperature.

3. The edges of the sealing material for an open chest wound should extend how far past the edge of the wound?

A. At least 1 inch

B. At least 2 inches

C. At least 3 inches

D. At least 4 inches

4. What is the ideal ratio of compressions to breaths in CPR for adults?

A. 15 compressions to 1 breath

B. 30 compressions to 2 breaths

C. 20 compressions to 2 breaths

D. 10 compressions to 1 breath

5. After using Micropur MP1 water purifier tablets, how long should one wait before drinking contaminated water?

A. 1 hour

B. 2 hours

C. 4 hours

D. 8 hours

6. How should a casualty experiencing difficulty breathing be reassured?

A. By telling them to not panic

B. By having them lie down flat

C. By ensuring they can see help arriving

D. By supporting them in a comfortable position

7. What is a potential consequence of not treating hypothermia promptly?

A. It may lead to sweating and fatigue.

B. It can cause accelerated heart rate.

C. It may result in unconsciousness or death.

D. It can trigger asthma attacks.

8. What is the primary goal of psychological first aid in SABC?

A. To replace traditional medical interventions

B. To stabilize physical injuries

C. To promote coping mechanisms after trauma

D. To ensure legal compliance for care provision

9. Describe the care required for a casualty who is unconscious but breathing.

A. Keep them lying flat on their back.

B. Place them in the recovery position.

C. Monitor their blood pressure continuously.

D. Attempt to wake them by shaking them gently.

10. What should you do after placing the elastic bandage through the pressure bar when using an emergency bandage?

A. Cut the bandage to size

B. Reverse the wrapping direction, and continue bandaging the wound

C. Leave it in place without wrapping

D. Apply additional pressure with your hand

Answers

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

Explanations

1. Why is it necessary to seek higher medical care after providing SABC?

A. To ensure the casualty feels supported

B. To provide definitive treatment not covered by SABC

C. To document the incident for legal purposes

D. To prepare the casualty for discharge

Seeking higher medical care after providing Self-Aid and Buddy Care is essential because it allows for definitive treatment that may not be accessible through SABC. Self-Aid and Buddy Care is primarily focused on immediate interventions to stabilize a casualty and manage life-threatening conditions. However, it does not replace the need for advanced medical care, which is necessary for comprehensive evaluation, diagnosis, and treatment of injuries or illnesses. Higher medical care can provide advanced diagnostics, specialized treatment options, and a full range of medical interventions that SABC is not designed to deliver, such as surgeries, imaging studies, and long-term rehabilitation. It's important to understand that while SABC plays a critical role in the initial response to a medical emergency, many situations require further care to ensure a complete recovery and to address underlying health issues effectively.

2. Which vital sign should be checked to assess a casualty's breathing?

A. Blood pressure.

B. Pulse rate.

C. Respiratory rate.

D. Temperature.

To assess a casualty's breathing, the respiratory rate is the most relevant vital sign to examine. The respiratory rate indicates how many breaths a person takes within a minute, providing direct insight into their respiratory function. An abnormal respiratory rate can signal that the individual is hypoxic (not getting enough oxygen) or experiencing respiratory distress, which are critical conditions that require immediate attention. Monitoring the respiratory rate helps responders determine the effectiveness of a casualty's breathing and identify any potential life-threatening issues. This vital sign is essential in the context of maintaining airway and breathing, which are foundational elements of general medical assessments. Other vital signs, such as blood pressure, pulse rate, and temperature, while important for overall assessment, do not specifically reflect the status of the casualty's breathing. Blood pressure primarily indicates cardiovascular health, pulse rate reflects heart function, and temperature assesses metabolic status or infection but does not provide direct insight into respiratory performance. Therefore, focusing on the respiratory rate is crucial for evaluating a casualty's ability to breathe effectively.

3. The edges of the sealing material for an open chest wound should extend how far past the edge of the wound?

A. At least 1 inch

B. At least 2 inches

C. At least 3 inches

D. At least 4 inches

The correct response highlights the importance of ensuring that the sealing material for an open chest wound extends at least 2 inches beyond the edges of the wound. This extension is crucial because it helps to create a proper seal that protects the wound from external contaminants and prevents air from entering the chest cavity, which is vital in managing a potential pneumothorax. A seal that extends adequately beyond the wound not only enhances the effectiveness of the dressing but also reduces the likelihood of the seal becoming dislodged or compromised due to movement or body mechanics. This is particularly important in the context of open chest wounds, where maintaining negative pressure within the thoracic cavity can be critical for patient outcomes. By extending the sealing material at least 2 inches, caregivers can provide a more reliable barrier that supports patient stability and aids in the overall management of the injury.

4. What is the ideal ratio of compressions to breaths in CPR for adults?

A. 15 compressions to 1 breath

B. 30 compressions to 2 breaths

C. 20 compressions to 2 breaths

D. 10 compressions to 1 breath

The ideal ratio of compressions to breaths in CPR for adults is 30 compressions to 2 breaths. This ratio is based on guidelines established by the American Heart Association and is designed to optimize the effectiveness of CPR by maintaining blood circulation while also providing oxygen to the victim. In adult CPR, performing 30 compressions before giving 2 rescue breaths ensures that there is a continuous flow of chest compressions, which is critical for maintaining blood flow to vital organs during cardiac arrest. The compressions are intended to create pressure in the chest cavity, pushing blood to the heart and brain, while the rescue breaths provide the necessary oxygen. The other options reflect outdated guidelines or incorrect ratios that do not align with current CPR standards. Thus, adhering to the 30:2 ratio is essential for maximizing the chance of survival in a cardiac emergency.

5. After using Micropur MP1 water purifier tablets, how long should one wait before drinking contaminated water?

A. 1 hour

B. 2 hours

C. 4 hours

D. 8 hours

After using Micropur MP1 water purifier tablets, it is essential to wait for a specific period before drinking the water to ensure that the purification process is effective. Micropur MP1 tablets contain chlorine dioxide, which requires time to eliminate harmful microorganisms present in contaminated water. The recommended wait time is 4 hours, as this allows the chlorine dioxide to properly disinfect the water, making it safe for consumption. This timeframe is crucial because it ensures that not only are bacteria and viruses neutralized, but also that any protozoan cysts and other pathogens are effectively eradicated. Waiting for the full 4 hours maximizes the effectiveness of the purification process, reducing the risk of waterborne illnesses that could occur if the water is consumed too soon.

6. How should a casualty experiencing difficulty breathing be reassured?

A. By telling them to not panic

B. By having them lie down flat

C. By ensuring they can see help arriving

D. By supporting them in a comfortable position

Supporting a casualty in a comfortable position is crucial for individuals experiencing difficulty breathing. This approach helps the casualty feel more secure and allows for optimal airway management, which can alleviate anxiety and improve their ability to breathe. Typically, a seated position with support may facilitate better lung expansion and reduce the strain on their respiratory muscles. Reassuring someone during a breathing crisis involves providing comfort and helping them relax. By allowing them to adopt a position that eases their breathing, you not only help them physically but also contribute to their emotional reassurance, promoting a sense of control during a distressing situation. In contrast, suggesting that they lie down flat may exacerbate their breathing difficulties, as this position can restrict airflow and make it harder for them to breathe. Telling someone not to panic doesn't help if they are already struggling to breathe; it can even increase their anxiety. While ensuring they can see help is important, it does not directly address their immediate physical discomfort or breathing issue, making the other choice a more effective method of reassurance.

7. What is a potential consequence of not treating hypothermia promptly?

A. It may lead to sweating and fatigue.

B. It can cause accelerated heart rate.

C. It may result in unconsciousness or death.

D. It can trigger asthma attacks.

Hypothermia occurs when the body loses heat faster than it can produce it, leading to a dangerously low body temperature. If not treated promptly, one significant consequence of hypothermia is that it can result in unconsciousness or death. As the body's core temperature drops, vital organs begin to fail, and mental functioning deteriorates, which can lead to confusion, poor decision-making, and ultimately a loss of consciousness. In severe cases, prolonged exposure can lead to cardiac arrest and death. This underlines the importance of recognizing and addressing hypothermia swiftly to prevent these life-threatening complications. Other symptoms and potential consequences related to hypothermia might include muscle stiffness or shivering, but they do not pose the same immediate risk to life as unconsciousness or death. Thus, prompt treatment is critical in managing hypothermic conditions effectively.

8. What is the primary goal of psychological first aid in SABC?

A. To replace traditional medical interventions

B. To stabilize physical injuries

C. To promote coping mechanisms after trauma

D. To ensure legal compliance for care provision

The primary goal of psychological first aid in Self-Aid and Buddy Care (SABC) is to promote coping mechanisms after trauma. This approach focuses on providing immediate support to individuals experiencing emotional distress following a traumatic event. By fostering coping strategies, the individual can better manage their reactions and feelings in the aftermath of a crisis. Psychological first aid helps individuals feel safe, connected, and supported, which is crucial for their emotional recovery. It is not about replacing traditional medical interventions or focusing solely on physical stabilization, although those aspects are also vital in a comprehensive care plan. Additionally, while ensuring legal compliance is important in healthcare settings, it is not the fundamental aim of psychological first aid. Therefore, promoting effective coping mechanisms is essential in assisting individuals to process their experiences and begin their healing journey.

9. Describe the care required for a casualty who is unconscious but breathing.

A. Keep them lying flat on their back.

B. Place them in the recovery position.

C. Monitor their blood pressure continuously.

D. Attempt to wake them by shaking them gently.

When caring for a casualty who is unconscious but breathing, placing them in the recovery position is essential. The recovery position helps maintain an open airway, which is crucial for breathing, while also reducing the risk of aspiration if the casualty vomits. This position allows fluids to drain out of the mouth, preventing choking, and ensures that the tongue does not obstruct the airway. Keeping the casualty lying flat on their back can pose a risk of airway obstruction and aspiration, as they may not have the muscle control to protect their airway adequately. Monitoring blood pressure continuously, while important for certain medical situations, is not the primary concern for an unconscious but breathing casualty. Attempting to wake the person by shaking them is not advisable, as this might cause unnecessary movement and potential harm, especially if there are underlying injuries. Therefore, placing an unconscious casualty who is breathing in the recovery position is the best practice for ensuring their safety and preserving their airway.

10. What should you do after placing the elastic bandage through the pressure bar when using an emergency bandage?

A. Cut the bandage to size

B. Reverse the wrapping direction, and continue bandaging the wound

C. Leave it in place without wrapping

D. Apply additional pressure with your hand

When using an emergency bandage, after placing the elastic bandage through the pressure bar, the correct action is to reverse the wrapping direction and continue bandaging the wound. This approach is vital because it helps to ensure consistent pressure on the wound, which is essential for controlling bleeding effectively. By reversing the direction, you can create a tighter and more secure fit, enhancing stability and preventing the bandage from loosening or slipping off as the individual moves. Properly applying the bandage in this way also facilitates better coverage of the wound and may help to absorb any fluid that may seep from the injury. It is important for the effectiveness of the bandaging technique in managing hemorrhaging and optimizing the healing process. The other options do not provide the necessary steps to maintain adequate pressure and secure the bandage effectively, which is crucial when dealing with emergency situations.