

Yellow = what was initially selected

Green = after research (our final answer)

- 1) When using a sphygmomanometer, which one of the following would result in an inaccurate, falsely elevated blood pressure?
 - a) Utilizing a cuff that is too wide for a patient's arm
 - b) Using a large blood pressure cuff on a patient with a small arm
 - c) Raising the patient's arm and the brachial artery above the level of the heart
 - d) Utilizing a blood pressure cuff that's too small

- 2) Where would you anticipate hearing s3 or s4 heart sounds in the cardiac cycle?
 - a) Diastole
 - b) S3 in systole with S4 in diastole
 - c) S4 in diastole while s3 in systole
 - d)

- 3) Where would the S1 heart sounds correlate with the electrocardiographic waves?
 - a) Peak of the R wave.
 - b) At the start of the T wave.
 - c) At the end of the T wave.
 - d) At the start of the P wave.

- 4) The point of maximum impulse (PMI) is MOST often palpable in healthy adults when positioned in the supine or left lateral decubitus position. Which one of the following locations is it?
 - a) Left 5th intercostal space, midclavicular line.
 - b) Right 4th intercostal space, midaxillary line.
 - c) Right 2nd intercostal space, midclavicular line.
 - d) Left 2nd intercostal space, midaxillary line

- 5) You auscultated abnormal breath sounds, and now assess transmission of voice sounds by having the patient say "ee" while auscultating the chest with the diaphragm of your stethoscope. Normally you should auscultate a muffled "e" sound, however, you hear a nasally "a" sound. Which one of the following is present? O
 - a) Stereognosis.
 - b) Bronchophony
 - c) Bronchophony
 - d) Egophony. Bates pg 327

- 6) How does performing percussion of the thorax assist the provider during the physical examination?
 - a) To assess for deep-seated lesion and tumors
 - b) To identify if underlying tissue are air filled, fluid-filled or consolidated
 - c) To assist with the confirmation of cardiac origin of angina.
 - d) To assess for any pain or discomfort prior to palpitation of the chest wall

- 7) You are about to perform a diaphragmatic excursion test on your healthy patient. Which one of the following results would you expect to see in a healthy patient with no abnormalities?
- a) Ascension of 8-12 inches of the diaphragm noted bilaterally on expiration, though often much less on the right side due to the location of the heart and great vessels.
 - b) Much greater descent of the diaphragm on the right side due to the liver present (two-three times larger)
 - c) Absent or no change in movement of the diaphragm noted between full inspiration and full expiration measurement.
 - d) **Approximately equal level of change in the descent of the diaphragm bilaterally during maximal inspiration and expiration**
- 8) A large inspiration of air to the further extent the patient can reasonably accomplish followed by a full exhalation is referred to as which of the following?
- a) Forced Expiratory Volume over 1 second (FEV1)
 - b) Inspiratory Reserve
 - c) Functional Reserve Capacity
 - d) **Forced Vital Capacity (Lehne pg 1681)**
- 9) A large goiter on the neck is most likely related to which of the following diagnoses?
- a) Iodine Excess.
 - b) **Hashimotos Thyroiditis**
 - c) Myxedema Coma
 - d) Thyrotoxicosis
- 10) Your patient states they have a diagnosis of hyperthyroidism. On assessment which of the following represents typical findings of hyperthyroidism?
- a) **Tachycardia (Bates 229)**
 - b) Recent unplanned weight gain
 - c) Hypersomnia
 - d) Lethargy