

Dear ITLS Provider Course Registrant

On behalf of AMR and ITLS of Michigan we are pleased to acknowledge your registration to the ITLS provider course. The course will be held at AMR, 517 S. Division Grand Rapids Mi (see map).

Late arrival to the course may result in cancellation of your registration without registration fee reimbursement.

We are sure you will find the course to be a challenging but enjoyable experience. Enclosed you will find:

1. The ITLS text (if requested) and pre-course test. Note an answer key not provided. We urge that you use it as a positive tool for course preparation.
2. A tentative course agenda. The final agenda will be available at registration.
3. Letter from ITLS of Michigan
4. Student Waiver form. Please review and be prepared to sign at course registration.

Your textbook is a very informative and, indeed, the foundation of the course. It should be pointed out, however, that the text is written as a generic, international guide. Please wear comfortable clothing suitable for dealing with moulaged patients and situations both in and out-of-doors.

We look forward to meeting and working with each of you in this effort to improve pre-hospital trauma assessment and management. If you have any questions please contact me at (616) 482-6686 or via e-mail [DMAatman@amr-ems.com](mailto:DMaatman@amr-ems.com).

Sincerely,

Course Coordinator

**ITLS of Michigan
ITLS Provider Course Agenda**

Date:

Location: AMR

Grand Rapids Mi

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|--------------|--|--|
| DAY 1 | | |
| 800-815 | Sign In & Coffee | |
| 815-830 | Welcome & Course Overview | |
| 830-900 | Fundamentals of ITLS | |
| 900-945 | Airway Management Case Presentations | |
| 945-1000 | Break | |
| 1000-1215 | Skill Stations (45 minute rotations) | |
| | ALS Skills (IO, Decomp, Demo alternative airway techniques) | |
| | 1. Spinal Immobilization (LBB, Standing, Helmet) | |
| | 2. Patient Assessment (Primary Survey) | |
| 1215-1300 | Lunch (on your own) | |
| 1300-1315 | Trauma In Pregnancy | |
| 1315-1615 | Skill Stations - Case Based | |
| | 1. Shock/Vascular Access/Fluid Therapy (neurogenic, hypovolemia, mechanical) | |
| | 2. Specific Injuries (Head, Tamponade, Burn) | |
| | 3. Airway Management | |
| 1615 approx | Adjourn | |
| DAY 2 | | |
| 0800-0845 | Special Considerations (ETOH, Drugs, Elderly, Spinal Immobilization Rule Out Criteria) | |
| 0845-0900 | Break | |
| 0900-0930 | Pediatric Trauma Case Presentations | |
| 0930-1000 | Faculty Demo | |
| 1000-1200 | Scenario Practice Stations (1 hour rotations) | |
| | 1. Faculty TBA | |
| | 2. Extrication (SBB & Rapid) | |
| 1200-1245 | Lunch (on your own) | |
| 1245-1315 | Lecture – Triage | |
| 1315-1615 | Testing | |
| | 1. Moulage Scenario | |
| | 2. Written Exam & Triage Integration Session | |
| 1615 approx | Adjourn | |

MICHIGAN CHAPTER

International Trauma Life Support

Dear ITLS Participant,

ITLS of Michigan would like to welcome you to your ITLS course. ITLS has been an active part of EMS education in Michigan since 1983 and continues its pursuit to be the leader in pre-hospital trauma care and education.

The ITLS provider and recertification courses, in Michigan, have gone through extensive changes over the years. Many of these changes have been based on the input we receive from participants like you. Recently we modified the format and content of the course to be more congruous with *Continuing Education/Ongoing Education* instead of *Refresher Training*. Instead of repeating what was taught in your initial training, we will build on your existing knowledge base. In view of this concept, we have certain expectations of your preparedness to take this course. Some of these expectations are:

- ❑ You have read the current ITLS Provider textbook (6th edition) and understand the objectives at the beginning of each chapter.
- ❑ You reviewed the sample questions (pre-test).
- ❑ You have fundamental understanding of pre-hospital emergency care and the associated skills e.g.:
 - Patient assessment
 - Spinal immobilization (long board & short board device)
 - Basic airway management
 - Splinting techniques
 - Use of personal protection equipment (PPE)
 - Advanced airway management (advanced providers only)
 - Vascular access (advanced providers only)

In Michigan, ITLS is a pass/fail course. To successfully complete the course you must: be in attendance for the entire course, score at least a 76% on the written post-test (which is based on the current ITLS Provider textbook), and pass a practical scenario. Critical actions for the practical include: perform a primary survey, repeat the ongoing assessment at least twice, provide appropriate airway management, maintain c-spine (if indicated) during the entire scenario, identify and treat all life threatening injuries and conditions, have an appropriate scene time (no unnecessary delays), and apply a c-collar before transport and extrication.

We are confident you will find the ITLS course challenging yet enjoyable. Thank you for your commitment to EMS trauma care.

Sincerely,

ITLS of Michigan

**ITLS of Michigan, Inc,
Student Waiver**

I understand that there are physical requirements which will be asked of me during this course involving physical contact, patient movement and extrication activities. I am under no physical restrictions at this time which would prevent my participation in this program. I have not sustained any recent injuries or illnesses which would preclude participation. Likewise, I do not currently suffer any illnesses (e.g. current infectious diseases) or injuries which would pose a risk to myself, students, instructors or simulated victims by my participation. I hereby release ITLS of Michigan, Inc. and the sponsoring agency or agencies of the course of any responsibility for any illnesses or injuries which may arise during participation in the course but occur as a consequence of any preexisting conditions.

Students Printed Name

Students Signature

Emergency Contact Number

Date

ITLS Advanced Pre-Test

- 1 . A 34 year old man is injured in a motor vehicle collision. Physical examination is normal except for diffuse abdominal tenderness. Capillary refill is normal. Vital signs obtained en route to the hospital are blood pressure 100/60; pulse, 120/min; respirations 28/min. How should this patient be managed in the field?
 - A. Intravenous (I.V.) of 0.9% normal saline (NS) at "keep open" rate
 - B. I.V. of RL at 20 ml/kg bolus
 - C. Pneumatic antishock trousers (PASG); inflate all three compartments
 - D. Insert an oralpharyngeal airway and assist ventilations
- 2 . What is Sellick's maneuver?
 - A. A method allowing the rescuer to hold a mask on the face with both hands
 - B. A system used to calculate minute volume
 - C. Another name for Mallampati
 - D. Posteriorly directed pressure applied to the cricoid cartilage
- 3 . For which one of the following viruses is there currently an effective vaccine?
 - A. Delta hepatitis
 - B. Hepatitis B
 - C. Hepatitis C
 - D. Human immunodeficiency virus
- 4 . A 16 year old girl is rescued from a burning house. She has 25% partial thickness burns, and the burned areas are hot to the touch. What is the appropriate treatment?
 - A. Apply ice to burned areas until cool to touch
 - B. Apply clean water to burned areas for up to 1-2 minutes
 - C. Apply iced water to burned areas until cool to touch
 - D. Do not apply anything to burned areas other than clean sheets
- 5 . Proper immobilization of a forearm (radius and ulna) fracture involves splinting which of the following?
 - A. Elbow and fracture site
 - B. Fracture site only
 - C. Wrist and fracture site
 - D. Wrist, elbow, and fracture site
- 6 . What treatment is NOT indicated in the routine management of the patient with a head injury?
 - A. Administration of 100% oxygen
 - B. Fluid resuscitation to a BP of 110-120 systolic if the patient is hypotensive
 - C. Hyperventilation
 - D. Stabilization of the cervical spine
- 7 . Which of the following sets of vital signs is most compatible with a diagnosis of isolated head injury with increasing intracranial pressure?
 - A. BP 170/100, pulse 50/min
 - B. BP 80/60, pulse 130/min
 - C. BP 80/60, pulse 50/min
 - D. BP 170/100, pulse 130/min

ITLS Advanced Pre-Test

- 8 . Which of the following trauma situations would be considered "load and go"?
- A. Awake and alert patient who has blood coming out of one ear
 - B. Patient who had brief loss of consciousness but is now awake
 - C. Patient with abdominal tenderness, clammy skin, blood pressure 100/70, and pulse 130/min
 - D. Patient with tender, deformed lower leg
- 9 . Which one of the following should be performed, at the scene of a "load and go", prior to moving the trauma patient to the ambulance?
- A. Apply traction splint for femur fracture
 - B. Decompress tension pneumothorax
 - C. Initiate intravenous line
 - D. Obtain vital signs
- 10 . Which one of the following is a reason to interrupt the initial assessment?
- A. Cardiac arrest
 - B. Multiple open (compound) fractures
 - C. Severe head injury with brain tissue visible
 - D. Severe shock
- 11 . A 24 year old woman is found lying on the sidewalk after jumping from a fourth story window. She is hypotensive, diaphoretic, tachycardic, and unconscious. Injuries include open skull fracture, pelvis fractures, and flail chest. What should be your goal for your time?
- A. 5 minutes or less
 - B. 5 to 10 minutes
 - C. 10 to 15 minutes
 - D. As long as necessary to assess and stabilize the patient
- 12 . Which of the following injuries would change an otherwise stable trauma patient's category from "stable" to "load and go"?
- A. Bilateral clavicle fractures
 - B. Bilateral femur fractures
 - C. Bilateral humerus fractures
 - D. Bilateral tibia fractures
- 13 . What is most commonly injured, during a fall from a height, of an infant?
- A. Head
 - B. Chest
 - C. Abdomen
 - D. Extremities
- 14 . What site is first choice for pediatric intraosseous infusion?
- A. Proximal tibia
 - B. Distal humerus
 - C. Proximal femur
 - D. Distal fibula

ITLS Advanced Pre-Test

- 15 . Which of the following will generally suffer the LEAST structural damage from a gunshot wound from a rifle?
- A. Spleen
 - B. Kidney
 - C. Liver
 - D. Lung
- 16 . A 34 year old man has a gunshot wound to the right groin area. Arterial bleeding, which cannot be controlled with direct pressure, is coming from the wound. The patient appears confused, diaphoretic, and has weak peripheral pulses. What is the appropriate fluid resuscitation for this patient?
- A. I.V. at "keep open" rate
 - B. Apply a hemostatic agent and gain IV access given enough fluid to maintain peripheral pulses
 - C. I.V. wide open rate; give at least two liters, then reassess patient
 - D. No I.V. should be started in this situation
17. Which one of the following is typically associated with, post-traumatic hemorrhage, EARLY shock?
- A. Ventricular dysrhythmias
 - B. Hypotension
 - C. Loss of 30% to 45% of blood volume
 - D. Larrowed pulse pressure
- 18 . Among the following, what is the most common cause of preventable trauma death in the injured adult patient?
- A. Airway obstruction
 - B. Cardiac tamponade
 - C. Hemorrhagic shock
 - D. Spinal injury
- 19 . In which of the following situations should an emergency rescue be used?
- A. Leaking antifreeze from radiator
 - B. Paralyzed patient
 - C. Presence of toxic fumes
 - D. Pregnant patient
- 20 . Which of the following is most typical of early, neurogenic shock?
- A. Increased pulse, clammy skin
 - B. Increased pulse, warm and dry skin
 - C. Decreased pulse, clammy skin
 - D. Decreased pulse, warm and dry skin
21. A 23 year old man is injured in a motorcycle collision. The patient appears disoriented and grossly intoxicated. There is a large laceration on his scalp which is actively bleeding. The patient refuses treatment and threatens to call his lawyer if anyone touches him. What should you do?
- A. Allow the patient to phone his lawyer
 - B. Have the patient sign a release form, then let him go
 - C. Have the patient placed under protective custody then treat and transport the patient using restraints if necessary
 - D. Wait until the patient passes out from his head injury or bleeding then transport

ITLS Advanced Pre-Test

- 22 . Which of the following is an acceptable location to insert a needle when decompressing a tension pneumothorax?
- A. Directly under the bottom of the second rib, midclavicular line
 - B. Directly under the bottom of the third rib, midclavicular line
 - C. Directly over the top of the third rib, midaxillary line
 - D. Directly over the top of the third rib, midclavicular line
23. A 54 year old man is involved in a motor vehicle collision. The steering wheel is bent. During your initial assessment you note his skin is pale and his radial pulses are present. Breath sounds are clear, heart tones are not muffled. Which one of the following is most consistent with these findings?
- A. Cardiac contusion
 - B. Traumatic aortic rupture
 - C. Flail chest
 - D. Tension pneumothorax
- 24 . What is the most common cause of cardiopulmonary arrest in the trauma patient?
- A. Brain injury
 - B. Hypoxemia
 - C. Myocardial contusion
 - D. Ventricular arrhythmia
25. A 49 year old man is involved in a motor vehicle collision. First responders are doing CPR. Findings include a distended abdomen and obviously deformed pelvis and a quick look at the monitor shows asystole. Which of the following is the most appropriate act?
- A. Establish IV access and administer a 20mL/kg bolus
 - B. Establish IV access and administer a 1 liter bolus
 - C. Establish IV access and administer a 2-4 liter bolus
 - D. Resuscitative efforts should not be started and the patient pronounced dead
- 26 . Which of the following statements concerning treatment of shock in the pregnant, burn patient is TRUE?
- A. Oxygen should be used sparingly so as to avoid oxygen toxicity to the fetus
 - B. Pressor agents such as dopamine should be used to improve circulation to the fetus
 - C. Volume replacement should be given earlier and in larger amounts to the pregnant, burn patient
 - D. Volume replacement should be given more slowly so as to avoid fluid overloading the fetus
27. Which area of the spine is most susceptible to injury in a rear-impact motor vehicle crash?
- A. Cervical
 - B. Thoracic
 - C. Lumbar
 - D. Sacral-coccygeal

ITLS Advanced Pre-Test

28. An unrestrained 18 year old male on the way to a post-graduation party leaves the road, bounces through a ditch and hits a tree. You find him behind the bent steering wheel, unconscious, cool, pale and clammy, blue around the lips with labored respirations of 30 and shallow, thready radial pulses of about 120, distended neck veins, tracheal deviation to the right, an asymmetrical chest with absent breath sounds on the left. You assume he has a
- A. Cardiac tamponade
 - B. Tension pneumothorax
 - C. Massive hemothorax
 - D. Simple pneumothorax
- 29 . Which one of the following mnemonics can be used to help predict which patients might potentially have difficult laryngoscopy and intubation?
- A. MMAP
 - B. IPPV
 - C. RSI
 - D. BOOTS
30. An unrestrained 18 year old male on the way to a post-graduation party leaves the road, bounces through a ditch and hits a tree. You find him behind the bent steering wheel, unconscious, cool, pale and clammy, with labored respirations of 30 and shallow, thready radial pulses of about 120, flat neck veins, trachea midline, an asymmetrical chest with absent breath sounds on the left. You assume he has a
- A. Cardiac tamponade
 - B. Tension pneumothorax
 - C. Massive hemothorax
 - D. Simple pneumothorax
- 31 . A 23 year old female has won the “Let’s-see-who-can-lean-the-farthest-backward-over-the-second-story-balcony-railing” contest. You arrive to find her boyfriend standing over her, holding two beers, as she lies on the grass under the balcony. She opens her eyes to voice, her skin is normal in color, respirations about 16 and unlabored, pulse 54 and a little weak at the wrist, with no external bleeding. She has flat neck veins, a normal chest and abdomen and a stable pelvis. First responders who arrived just before you tell you that her pulse ox reading is 94 and her BP is 74/30. If this is true,
- A. Hypovolemic shock
 - B. Relative hypovolemic (high-space) shock
 - C. Mechanical (obstructive) shock
 - D. Cardiogenic shock
32. A 23 year old female has won the “Let’s-see-who-can-lean-the-farthest-backward-over-the-second-story-balcony-railing” contest. You arrive to find her boyfriend standing over her, holding two beers, as she lies on the grass under the balcony. She opens her eyes to voice, her skin is cool, clammy and ashen, respirations are rapid and shallow, radial pulses are too rapid to count and thready. There is no external bleeding. She has flat neck veins, a normal chest and abdomen and pelvis. Her boyfriend tells you that she has some kind of heart problem but he doesn’t know what. Placed on the monitor, she shows a wide-complex tachycardia of about 280. What kind of shock is she suffering?
- A. Hypovolemic shock
 - B. Relative hypovolemic (high-space) shock
 - C. Mechanical (obstructive) shock
 - D. Cardiogenic shock

ITLS Advanced Pre-Test

- 33** . Which of the following would be the most compelling reason to intubate a patient immediately?
- A.** Snoring respirations
 - B.** Gurgling respirations
 - C.** Inability to ventilate (achieve chest rise)
 - D.** Traumatic arrest