Age: Gender: Have you received emergency medicine internship?

Yes No

## **Questions:**

1- You are working as a doctor in the 112-emergency team. A 32-year-old male patient called the 112 emergency services with the complaint of feeling faint at home. The patient has no known disease, history of drug use, or history of surgery. There are no other clinical features in his personal or family history. When you arrived at the scene with the 112-emergency team, you saw that the general condition of the patient was moderate, and he was conscious and oriented-cooperative. His vitals were measured as follows: blood pressure, 80/50 mm/Hg; saturation, 90%; and pulse, 118/minute.

According to his anamnesis, he had complaints of nausea-vomiting that started after taking painkillers for headache, and later he developed near syncope and shortness of breath. The physical examination of the patient showed uvula edema, coarse lung sounds, and normal abdominal examination findings. What is the most appropriate treatment for this patient?

a. 1 mg adrenalin IV. d. 0.5 mg adrenalin IV.

b. 1 mg adrenalin IM. e. 0.5 mg atropine IV.

c. 0.5 mg adrenalin IM.

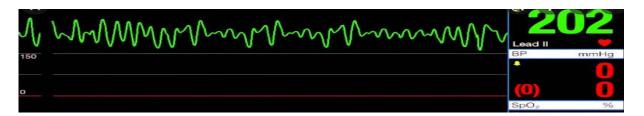
2- A 69-year-old female patient was brought to the emergency room by the 112-emergency team with the complaint of a sudden collapse while walking around a shopping center.

The general condition of the patient is poor. She is unconscious with no pulse, and she is gasping for breath. The 112-emergency team said that they were able to take her pulse at the scene, but there was no pulse on arrival at the emergency department. What should be the first intervention?

a. Intubating the patient. d. Applying chest compressions.

b. Monitoring the patient. e. Performing ECG.

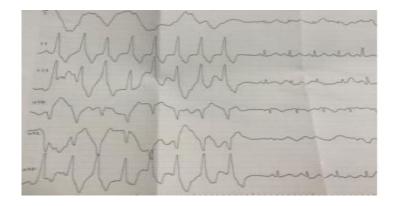
- c. Opening vascular access and giving 1 mg adrenaline
- **3-** A 38-year-old male patient was brought to the emergency department by the 112-emergency team with the complaint of collapse while playing football on an astroturf field. The general condition of the patient is moderate. He is conscious but not oriented-cooperative. He has a blood pressure of 70/30 and irregular respiration. The monitor of the 112-emergency team displays the rhythm in the following image. What should be the first intervention?



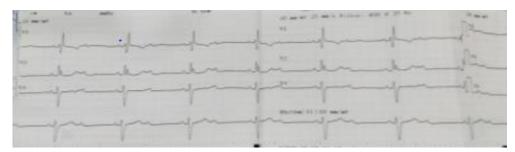
a. Performing ECG.

- d. Preparing to perform cardioversion.
- b. Applying chest compressions.
- e. Administering 1 mg adrenalin.
- c. Preparing to defibrillate.
- 4- A 56-year-old female patient presented to the emergency department with the complaint of palpitations. She has diabetes mellitus and hypertension diagnoses but no other known comorbidities. She is using insulin and metformin for the treatment of diabetes and taking B-blockers for the treatment of hypertension. She does not use any other drugs. There are no other clinical features in her personal or family history. The general condition of the patient is moderate. She is conscious and oriented-cooperative. Among the vital signs measured, the blood pressure is 180/70, heart rate is 180/min, and

saturation is 94%. Her ECG is shown below. What should be the first intervention?

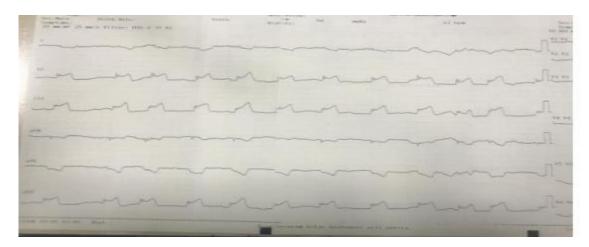


- a. Preparing to defibrillate.
- b. Preparing to perform cardioversion.
- c. Administering 150 mg amiodarone.
- d. Administering 300 mg amiodarone.
- e. Administering 300 mg aspirin.
- 5- A 39-year-old male patient presented to the emergency department with the complaint of syncope. He has no known chronic disease or drug use. There are no other clinical features in his personal or family history. The general condition of the patient is moderate. He is conscious and oriented-cooperative. His blood pressure is 80/50 mm/Hg, and heart rate is 40/minute. The patient's ECG is given below. What should be the first treatment?



- a. 0.5 mg adrenalin IM.
- d. 1 mg adrenalin IV.
- b. 0.5 mg norepinephrine IV.
- e. 300 mg adrenalin IV.
- c. External pacemaker.

- 6- A 28-year-old female patient is brought to the emergency department following an invehicle traffic accident. Her general condition is moderate. She is conscious and oriented-cooperative with stable vital signs. On the physical examination of the patient, there is tenderness in the pelvic ring. The vital signs measured after radiological imaging show 70/50 mm/Hg blood pressure, 120/minute heart rate, and 96% saturation. What should be the first intervention for this patient?
  - a. Opening IV vascular access and starting dopamine infusion.
  - b. Opening intravenous access and administering 2 liters of isotonic IV.
  - c. Starting erythrocyte suspension infusion.
  - d. Starting norepinephrine infusion.
  - e. Applying a pelvic belt.
- 7- A 48-year-old female patient presented to the emergency department with chest pain and no known disease. Her personal and family history and physical examination findings are unremarkable. Her vital signs are measured as follows: blood pressure, 130/70 mm/Hg; pulse, 70/min; and saturation, 96%. Her EKG is given below. What is the most appropriate treatment for this patient?



- a. ECG is normal but I would administer 300 mg acetylsalicylic acid orally as a prophylactic.
- b. ECG shows bradycardia. I would administer 1 mg adrenalin.

- c. ECG has ST-elevation MI findings. I would administer 300 mg acetylsalicylic acid orally.
- d. ECG has ST-elevation MI findings. I would administer 150 mg acetylsalicylic acid orally.
- e. ECG shows bradycardic. I would administer 1 mg atropine.