



Up-to-date Questions and Answers from authentic resources to improve knowledge and pass the exam at very first attempt. ----- Guaranteed.



ACLS Dumps
ACLS Braindumps
ACLS Real Questions
ACLS Practice Test
ACLS Actual Questions



Medical

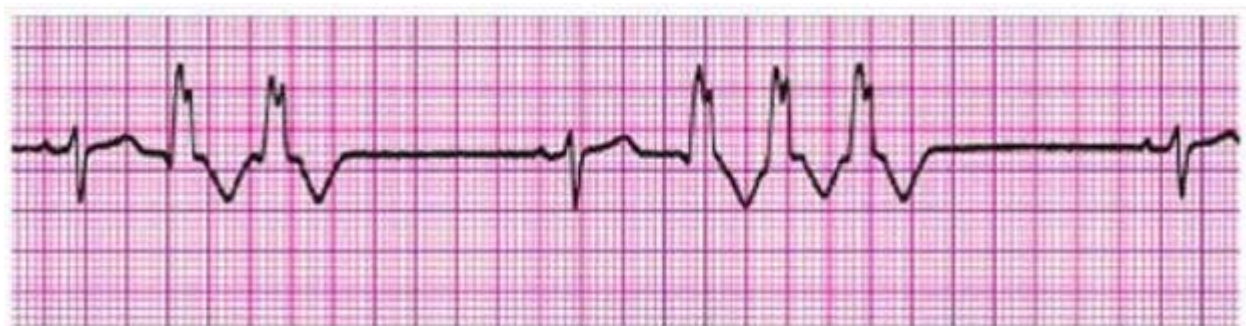
ACLS

Advanced Cardiac Life Support - 2023



<https://killexams.com/pass4sure/exam-detail/ACLS>

Question #342

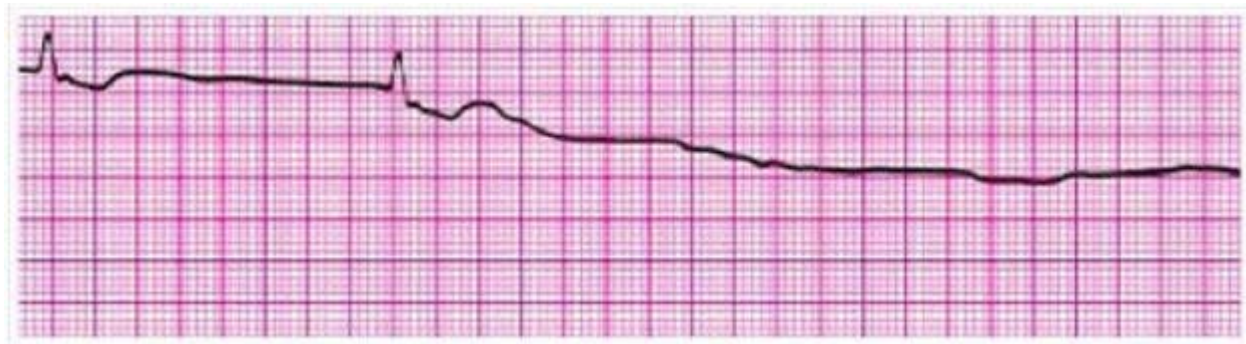


A patient has been resuscitated from cardiac arrest and is being prepared for transport. She is incubated and is receiving 100% oxygen. During the resuscitation she received 2 doses of epinephrine 1 mg, atropine 1 mg, and lidocaine 100 mg IV. You now observe the above rhythm on the cardiac monitor. The rhythm abnormality is becoming more frequent and increasing in number. You should order:

- A. Give amiodarone 300 mg IV, start infusion
- B. Give lidocaine 1 to 1.5 mg IV
- C. Repeat epinephrine 1 mg IV
- D. Give lidocaine 0.5 to 0.75 mg/kg IV, start lidocaine infusion
- E. Give amiodarone 150 mg IV, start infusion

Answer: D

Question #343



A patient was in refractory ventricular fibrillation. A third shock has just been administered. Your team looks at you for instruction. Your immediate next order is:

- A. Give atropine 1 mg IV
- B. Resume high-quality chest compressions
- C. Give amiodarone 300 mg IV
- D. Perform endotracheal intubation
- E. Give epinephrine 1 mg IV

Answer: B

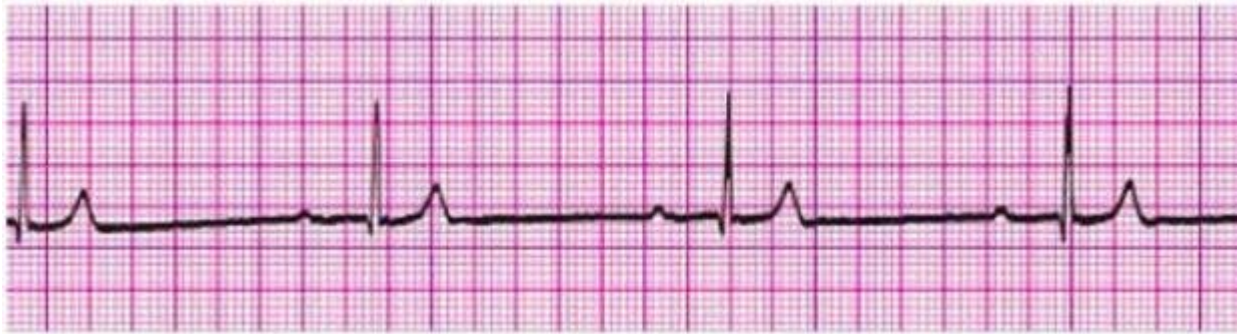
Question #344

A patient presents with the above rhythm complaining of an irregular heartbeat. She has no other complaints. Past medical history is significant for a myocardial infarction 7 years ago. Blood pressure is 110/70 mmHg. At this time you would

- A. Continue monitoring and seek expert consultation
- B. Administer nitroglycerin 0.4 mg sublingual or spray
- C. Perform emergency synchronized cardioversion
- D. Administer lidocaine 1 mg/kg IV
- E. Perform elective synchronized cardioversion with premedication

Answer: A

Question #345



You arrive on-scene to find CPR in progress. Nursing staff report that the patient was recovering from a pulmonary embolism and suddenly collapsed. There is no pulse or spontaneous respirations. High-quality CPR is in progress, and effective ventilation is being provided with bag-mask. An IV has been initiated. You would now

- A. Initiate transcutaneous pacing
- B. Give epinephrine 1.0 mg IV
- C. Order immediate endotracheal intubation
- D. Give atropine 0.5 mg IV
- E. Give atropine 1 mg IV

Answer: B

Question #346



A 45-year-old woman with a history of palpitations develops lightheadedness and palpitations. She has received adenosine 6 mg IV for the rhythm shown above without conversion of the rhythm. She is now extremely apprehensive. Blood pressure is 108/70 mmHg. The next appropriate intervention is

- A. Perform vagal maneuvers and repeat adenosine 6 mg IV
- B. Perform immediate unsynchronized cardioversion
- C. Repeat adenosine 12 mg IV
- D. Repeat adenosine 3 mg IV
- E. Sedate and perform synchronized cardioversion

Answer: C

Question #347



You arrive on-scene and find a 56-year-old diabetic woman complaining of chest discomfort. She is pale and diaphoretic, complaining of lightheadedness. Her blood pressure is 80/60 mmHg. The cardiac monitor documents the rhythm above. She is receiving oxygen at 4 L/min by nasal cannula, and an IV has been established. Transcutaneous pacing has been requested but is not yet available.

Your next order is -

- A. Give morphine sulfate 4 mg IV
- B. Start dopamine at 2 to 10 ug/kg per minute
- C. Give atropine 0.5 mg IV
- D. Give atropine 1 mg IV
- E. Give nitroglycerin 0.4 mg SL

Answer: C

Question #348

You are evaluating a patient with 15-minute duration of chest pain during transportation to the emergency department. He is receiving oxygen, and 2 sublingual nitroglycerin tablets have relieved his chest discomfort. He has no complaints but appears anxious. Blood pressure is 130/70 mmHg. You observe the above rhythm on the monitor and your next action is

- A. Give atropine 0.5 mg IV
- B. Initiate transcutaneous pacing (TCP)
- C. Continue monitoring patient, prepare for TCP
- D. Administer nitroglycerin 0.4 mg SL
- E. Start epinephrine 2 to 10 ug/min and titrate

Answer: C

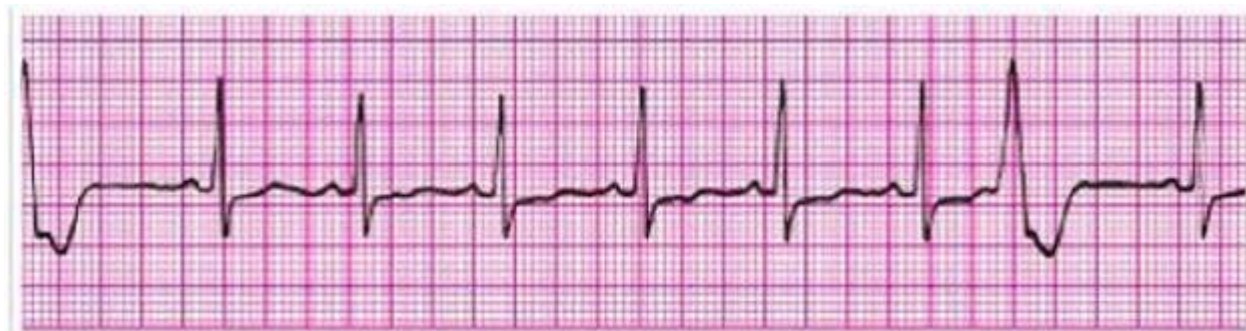
Question #349

Following resuscitation with CPR and a single shock, you observe this rhythm while preparing the patient for transport. Your patient is stable and blood pressure is 120/80 mmHg. She is apprehensive but has no complaints other than palpitations. At this time you would

- A. Give magnesium sulfate 1 to 2 g over 20 minutes
- B. Seek expert consultation
- C. Give amiodarone 300 mg IV, start infusion
- D. Give lidocaine 1 to 1.5 mg IV, start lidocaine infusion

Answer: B

Question #350



A patient in the ED develops recurrent chest discomfort (8/10) suspicious for ischemia. His monitored rhythm becomes irregular as seen above. Oxygen is being administered by nasal cannula at 4 L/min and an intravenous line is patent. Blood pressure is 160/96 mmHg. There are no allergies or contraindications to any medication. You would first order

- A. Lidocaine 1 mg/kg IV and infusion 2 mg/min
- B. Morphine sulfate 2 to 4 mg IV
- C. Nitroglycerin 0.4 mg SL
- D. Amiodarone 150 mg IV
- E. Intravenous nitroglycerin initiated at 10 ug/min and titrated

Answer: C

Question #351



This patient was admitted to the general medical ward with a history of alcoholism. A code is in progress and he has recurrent episodes of this rhythm. You review his chart. Notes about the 12-lead ECG say that his baseline QT-interval is top normal to slightly prolonged. He has received 2 doses of epinephrine 1 mg and 1 dose of amiodarone 300 mg IV so far. For his next medication you would now order

- A. Repeat amiodarone 150 mg IV
- B. Lidocaine 1 to 1.5 mg IV and start infusion 2 mg/minute
- C. Repeat amiodarone 300 mg IV
- D. Give magnesium sulfate 1 to 2 g IV diluted in 10 ml_ D5W given over 5 to 20 minutes
- E. Give sodium bicarbonate 50 mEq IV

Answer: D

Question #352



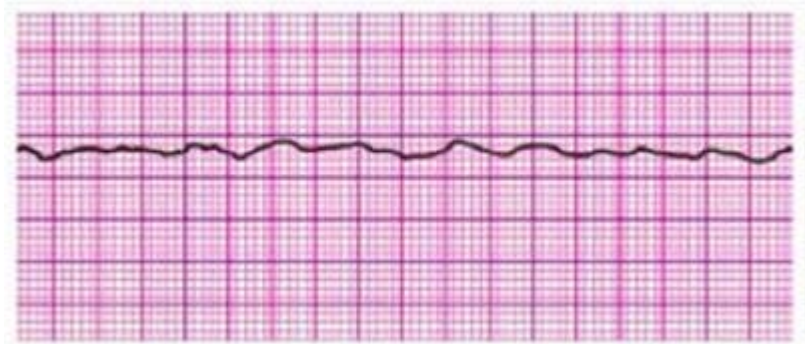
This patient suddenly collapsed and is poorly responsive. The patient has a weak carotid pulse. A cardiac monitor, oxygen, and an intravenous line have been initiated. The code cart with all drugs and pF transcutaneous pacer is immediately available. Next you would

- A. Initiate dopamine at 10 to 20 ug/kg per minute and titrate heart rate
- B. Give atropine 1 mg IV up to a total dose of 3 mg

- C. Initiate epinephrine at 2 to 10 ug per minute and titrate heart rate
- D. Initiate dopamine at 2 to 10 ug/kg per minute and titrate heart rate
- E. Begin transcutaneous pacing

Answer: E

Question #353



Following initiation of CPR and one shock for VF, this rhythm is present on the next rhythm check. A second shock is given and chest compressions are immediately resumed. An IV is in place and no drugs have been given. Bag-mask ventilations are producing visible chest rise. What is your next order?

- A. Prepare to give amiodarone 300 mg IV
- B. Administer 3 sequential (stacked) shocks at 360 Joules (monophasic defibrillator)
- C. Perform endotracheal intubation; administer 100% oxygen
- D. Administer 3 sequential (stacked) shocks at 200 Joules (biphasic defibrillator)
- E. Prepare to give epinephrine 1 mg IV

Answer: E

Question #354



A patient with an acute MI on a 12-lead ECG transmitted by the paramedics has the above findings on a rhythm strip when a monitor is placed in the ED. The patient had resolution of moderate (5/10) chest pain with three doses of sublingual nitroglycerin. Blood pressure is 104/70 mmHg. Which intervention below is most important, reducing in-hospital and 30-day mortality?

- A. Atropine 1 mg IV, total dose 3 mg as needed
- B. Intravenous nitroglycerin for 24 hours
- C. Reperfusion therapy
- D. Atropine 0.5 mg IV, total dose 2 mg as needed
- E. Temporary pacing

Answer: C



SAMPLE QUESTIONS

*These questions are for demo purpose only. **Full version** is up to date and contains actual questions and answers.*

Killexams.com is an online platform that offers a wide range of services related to certification exam preparation. The platform provides actual questions, exam dumps, and practice tests to help individuals prepare for various certification exams with confidence. Here are some key features and services offered by Killexams.com:

Actual Exam Questions: *Killexams.com provides actual exam questions that are experienced in test centers. These questions are updated regularly to ensure they are up-to-date and relevant to the latest exam syllabus. By studying these actual questions, candidates can familiarize themselves with the content and format of the real exam.*

Exam Dumps: *Killexams.com offers exam dumps in PDF format. These dumps contain a comprehensive collection of questions and answers that cover the exam topics. By using these dumps, candidates can enhance their knowledge and improve their chances of success in the certification exam.*

Practice Tests: *Killexams.com provides practice tests through their desktop VCE exam simulator and online test engine. These practice tests simulate the real exam environment and help candidates assess their readiness for the actual exam. The practice tests cover a wide range of questions and enable candidates to identify their strengths and weaknesses.*

Guaranteed Success: *Killexams.com offers a success guarantee with their exam dumps. They claim that by using their materials, candidates will pass their exams on the first attempt or they will refund the purchase price. This guarantee provides assurance and confidence to individuals preparing for certification exams.*

Updated Content: *Killexams.com regularly updates its question bank and exam dumps to ensure that they are current and reflect the latest changes in the exam syllabus. This helps candidates stay up-to-date with the exam content and increases their chances of success.*

Technical Support: *Killexams.com provides free 24x7 technical support to assist candidates with any queries or issues they may encounter while using their services. Their certified experts are available to provide guidance and help candidates throughout their exam preparation journey.*

For More exams visit <https://killexams.com/vendors-exam-list>
Kill your exam at First Attempt....Guaranteed!