1. What do crackles auscultated during lung sound assessment signify?
   A. Left ventricular failure or decrease in left ventricular compliance
   B. Right ventricular failure or decrease in right ventricular compliance
   C. Mitral regurgitation secondary to an incompetent valve
   D. Aortic stenosis secondary to an incompetent valve

2. Which of the following is appropriate for acute M.I. treatment?
   A. Morphine
   B. Oxygen
   C. Nitroglycerin
   D. All of the above

3. Which of the following laboratory values would indicate a patient has experienced an acute myocardial infarction?
   A. Creatine Kinase 75 U/L
   B. 4 CK-MB
   C. Troponin I 0.7 ng/ml
   D. CK-MM 96%

4. For a patient in P.E.A. (Pulseless electrical activity), which medication would be given first?
   A. Dopamine
   B. Lidocaine
   C. Amiodarone
   D. Epinephrine

5. When asystole is suspected, the nurse should:
   A. Administer lidocaine and defibrillate the patient
   B. Obtain a 12-lead ECG
   C. Begin an isoproterenol I.V. infusion
   D. Recheck the pulse before starting CPR

6. A patient is being monitored using a central venous pressure monitor. If the pressure is 2 cm of water, the nurse knows that the patient is ____________
   A. Dry
   B. Fluid Overloaded

7. A nurse is checking a patient's central venous pressure. The nurse should place the zero of the manometer at the:
   A. Phlebostatic axis
   B. PMI
   C. Erb's point
   D. Tail of Spence

8. The nurse is caring for a patient following a myocardial infarction. Which of the following enzymes are specific to cardiac damage?
   A. SGOT and LDH
   B. SGOT and CK-BB
   C. LDH and CK-MB
   D. LDH and CK-BB
9. A nurse is reviewing the lab results of a patient's arterial blood gases. The PaCO2 indicates effective functioning of the:
   A. Kidneys
   B. Pancreas
   C. Lungs
   D. Liver

10. A patient is admitted to the ICU with complaints of substernal chest pain radiating to the left jaw. The nurse connects the patient to a cardiac monitor and obtains a rhythm strip. Which finding is suggestive of acute myocardial infarction?
   A. Peaked P wave
   B. Changes in ST segment
   C. Minimal QRS wave
   D. Prominent U wave

11. The classical ECG change in an acute myocardial infarction (MI) is a/an:
   A. Inverted Q wave
   B. ST segment elevation
   C. Frequent PVCs
   D. Prolonged PR interval

12. The major therapeutic goal in the treatment of cardiogenic shock is to:
   A. Increase after load
   B. Lower the BUN
   C. Increase cardiac output
   D. Decrease extracellular fluid volume

13. A strong ventricular stimulus is potentially dangerous when it lands on the:
   A. U wave
   B. P wave
   C. T wave
   D. QRS complexes

14. The following wave pattern indicates ideal functioning of an arterial line.

   ![Wave Pattern Image]

   A. True
   B. False
15. The following rhythm strip represents:

A. First degree heart block
B. Bradycardia
C. PEA
D. Third degree heart block

16. A normal mean pulmonary artery pressure is:
A. 12-16
B. 20-25
C. 26-30
D. 31-35

17. Signs of cardiac tamponade may include all of the following EXCEPT:
A. Distended neck veins
B. Pulsus paradoxus
C. Decreased systolic pressure
D. Bradycardia

18. A central venous pressure (CVP) reading directly reflects pressure in the:
A. Left atrium
B. Right atrium
C. Left ventricle
D. Pulmonary artery

19. A routine check of your patient's blood gas values show a pH of 7.40, pO2 of 100 mm Hg, pCO2 of 38 mm Hg, and HCO3 of 25 mEq. These results reflect:
A. Metabolic acidosis
B. Metabolic alkalosis
C. Normal values
D. Respiratory alkalosis

20. To assess proper positioning of an endotracheal tube, the MOST appropriate nursing action would be to:
A. Listen for minimal leak of the cuff
B. Listen for bilateral breath sounds
C. Check for chest expansion
D. Check the tidal volume indicator on the ventilator

21. Which of the following are now routinely recommended for patients with ischemic-type chest pain, unless allergies or contraindications exist?
A. Oxygen mask or nasal cannula
B. Nitroglycerin SL or IV
C. Aspirin PO
D. All of the above
22. Which of the following are indications for PTCA?
   A. Unstable or chronic angina
   B. AMI and post-AMI
   C. Postoperative angina after coronary artery bypass grafting
   D. All of the above

23. A patient is receiving tenecteplase (TNKase) 3 hours after an acute MI. Which of the following should you immediately report to the physician?
   A. PVC’s
   B. Bleeding gums
   C. Oozing at the insertion site
   D. Change in mental status

24. You receive a patient from the Emergency Department whose rhythm changes from sinus to ventricular fibrillation. According to the ACLS protocol, which of the following would be done first?
   A. Shock at 360 joules
   B. Begin CPR
   C. Administer 1 mg Epinephrine
   D. Administer 300 mg Amiodarone

25. Identify the following rhythm:
   ![Rhythm Diagram]
   A. Normal sinus rhythm
   B. Atrial flutter
   C. Dual chamber paced
   D. V-fib

26. Identify the following rhythm:
   ![Rhythm Diagram]
   A. V-tach
   B. Sinus rhythm with elevated ST segment
   C. 1st degree heart block
   D. Ventricular fibrillation
27. Identify the following rhythm:

![EKG Image]

A. Sinus arrhythmia  
B. Normal sinus rhythm  
C. Sinus tachycardia  
D. SVT

28. A first degree heart block is characterized by:

A. A prolonged PR interval  
B. A rapid rate  
C. A PR interval that gets progressively longer until one P wave is dropped  
D. All of the above