1. A patient complains of severe and sharp pain in the right lower abdominal quadrant. Based on the location, what organ or structure is most likely involved?
2. The liver
3. The kidney
4. The spleen
5. The appendix

Answer: d

Objective: 16-4

Reference: 496

1. Because the spleen is a solid organ, the primary threat to life when it is ruptured is:
2. blood loss.
3. pain.
4. infection.
5. inflammation.

Answer: a

Objective: 16-1

Reference: 496

1. The pancreas is best described as a(n):
2. absorptive organ.
3. hollow organ.
4. solid organ.
5. fluid-filled organ.

Answer: c

Objective: 16-4

Reference: 496

1. Which of the following statements is most likely to be said by a patient with parietal pain?
2. “I feel as though I have to vomit but can’t.”
3. “It seems to hurt all over my belly and back.”
4. “It hurts right here.”
5. “The pain seems to be dull and achy.”

Answer: c

Objective: 16-5

Reference: 500

1. A middle aged female patient informs you that she has a bad gallbladder and that it has been increasingly bothering her. Your assessment reveals tenderness and mild discomfort in the right upper quadrant of her abdomen. She also states that her right shoulder is aching. Given her history and complaint, you would recognize her shoulder pain as:
2. referred pain.
3. false pain.
4. unrelated pain.
5. muscular pain.

Answer: a

Objective: 16-2

Reference: 500

1. Which of the following statements indicates that an OEC Technician understands the goal of assessing a patient with abdominal pain?
2. “It is important to determine if the liver is the cause of pain, because a liver injury can cause the most life-threatening conditions.”
3. “If the patient has tenderness upon palpation of the abdomen, you should assume that bleeding is the cause.”
4. “It is more important to recognize a possible abdominal emergency than to determine its exact cause.”
5. “To best treat the patient, you must identify the exact cause of any abdominal pain.”

Answer: c

Objective: 16-2

Reference: 508

1. You are called to aid a patient complaining of abdominal pain. When you arrive, you find him lying supine complaining of pain in his lower abdomen. He is pale and has a look of distress on his face. Which of the following actions should you take first?
2. Inspect his abdomen.
3. Palpate his abdomen.
4. Assess his ABCDs.
5. Obtain a blood pressure reading.

Answer: c

Objective: 16-4

Reference: 508

1. A 43-year-old woman who is crying states that she has sharp abdominal pain that is localized to her right lower quadrant. When assessing her abdomen, you would:
2. start by palpating the left upper quadrant.
3. avoid palpating the entire abdomen.
4. start by palpating in the right lower quadrant.
5. avoid palpating the right lower quadrant.

Answer: a

Objective: 16-4

Reference: 509

1. While providing an in-service on abdominal pain, your medical director states that there are several different categories of pain and asks if anyone can identify and describe visceral pain. Which of the following responses is correct?
2. “Visceral pain is typically described as ‘sharp’ and occurs when a hollow organ has become infected.”
3. “A patient can easily locate the exact site of visceral pain, which is typically associated with nausea and vomiting.”
4. “Visceral pain occurs when an infection of the peritoneum lining the abdomen causes a rapid increase in body temperature.”
5. “A patient with visceral pain typically describes the pain as ‘aching’ and has a difficult time identifying its exact location.”

Answer: d

Objective: 16-3

Reference: 500

1. Which of the following assessment findings would increase your suspicion of gastrointestinal bleeding?
2. Sudden onset of constipation
3. Watery and foul-smelling diarrhea
4. Tarry, black stool
5. Sharp pain in the left lower quadrant

Answer: c

Objective: 16-2

Reference: 504

1. Assessment of a 21-year-old woman reveals that she has severe abdominal pain localized to her right upper quadrant. She is alert and oriented and has stable vital signs. After placing her supine on a stretcher, she quickly assumes a lateral recumbent position with her knees drawn up to her chest. Which of the following responses from you would be appropriate?
2. “It would be best if you stay on your back. Staying there will help decrease the pain.”
3. “You can stay on your side, but I need to you to keep your legs straight to help decrease the pain.”
4. “I need you to stay on your back and with your head up. That way, if you vomit you won’t aspirate it.”
5. “Are you more comfortable in that position? If you are, then you should stay on your side.”

Answer: d

Objective: 16-5

Reference: 509

1. You are called to assist a woman complaining of abdominal pain. Assessment reveals her to be nauseated and to have pain that is localized to the right lower quadrant of her abdomen. She states that she was not able to take her blood pressure medication this morning, and that she wants to take it now with a small glass of juice. Until she receives a further medical evaluation, you would encourage her to:
2. go ahead and take the medicine with juice.
3. crush the medication and then mix it in a small amount of water.
4. not take her medication or drink juice.
5. take the medication with water instead of juice.

Answer: c

Objective: 16-5

Reference: 510

1. You suspect that a man experiencing right lower quadrant pain has appendicitis. He states that he has no health insurance and wants to refuse care. He asks you what can happen if he has appendicitis but does not go to the hospital. Which of the following statements would you make in reply?
2. “Your appendix could rupture, causing a major infection, shock, and possible death.”
3. “The inflammation of the appendix will gradually subside, but in the meantime the pain can be terrible.”
4. “If you do not get care, blood may clot in your intestine and cause an obstruction.”
5. “Take an antacid, and if the pain does not subside in an hour or two, then you should go to the hospital.”

Answer: a

Objective: 16-5

Reference: 500

1. Which of the following statements regarding abdominal pain would lead you to suspect appendicitis?
2. “The stabbing pain started in the right side of my belly and spread up to my stomach.”
3. “I had back pain for about a week, and now the pain is all throughout my belly.”
4. “The pain started around my belly button and slowly spread down to the right side of my belly.”
5. “The pain comes and goes and is more noticeable on the left side of my stomach.”

Answer: c

Objective: 16-2

Reference: 500

1. When you are obtaining information for a medical history, which of the following items would be significant for a patient with suspected cholecystitis?
2. The patient started taking a new medication for high blood pressure.
3. The patient experienced a recent unexplained weight loss.
4. The patient has abstained from drinking alcohol over the past month.
5. The patient ate fried chicken and potato salad for dinner.

Answer: d

Objective: 16-2

Reference: 502

1. A 14-year-old girl sitting in the lodge is complaining of severe abdominal and flank pain. She tells you that her symptoms started a couple of days ago but have worsened over the last few hours. She has chills and thinks she might have a fever. Based on her complaints, you are concerned that she may have:
2. cholecystitis.
3. pyelonephritis.
4. hepatitis.
5. nephrolithiasis.

Answer: b

Objective: 16-1

Reference: 502

17. Which of the following statements is *false?*

1. Assessing abdominal complaints can be difficult because the nerve pathways for the gastrointestinal, urinary, and reproductive systems are in relative proximity to each other.
2. Problems affecting the organs in one system can seriously affect organs in another system.
3. Assessment of abdominal complaints is straightforward because the organs are specifically located and easily palpated.
4. One of the problems encountered when assessing abdominal complaints is a patient’s reluctance to allow the exam due to embarrassment or pain.

Answer: c

Objective: 16-4

Reference: 499

18. Colic is best described as:

1. intermittent severe abdominal pain caused by the obstruction and distension of a hollow organ.
2. an inflammatory condition involving the lining of the stomach.
3. a violent contraction of the stomach muscles due to noxious stimuli.
4. bloody stool.

Answer: a

Objective: 16-1

Reference: 506

19. Which of the following statements regarding acute abdomen is *false?*

1. OEC Technicians need to be able to pinpoint the source of an acute abdomen.
2. Physicians accurately diagnose the source of an acute abdomen on first examination only about 50 percent of the time.
3. OEC Technicians need only be able to recognize that the patient is very ill and needs to go the hospital.
4. An acute abdomen can rapidly spiral into septic or hypovolemic shock.

Answer: a

Objective: 16-2

Reference: 499

20. Rebound tenderness is best described as:

1. a very useful finding for diagnosing a problem in a prehospital environment.
2. severe pain that occurs after the sudden release of abdominal palpation pressure during an examination of the abdomen.
3. a type of pain that is initially relieved by vomiting but returns within a short period of time.
4. pain that radiates into an area other than the site of the affected organ.

Answer: b

Objective: 16-2

Reference: 509

21. A conscious patient with a GI/GU complaint is most often comfortable in:

1. a supine position with the knees slightly flexed.
2. the recovery position.
3. the Trendelenburg position.
4. a supine position with the feet elevated 12–18 inches.

Answer: a

Objective: 16-5

Reference: 510

22. An infection involving one or both kidneys and ureters is called:

1. a perforated bowel.
2. a bowel obstruction.
3. pyelonephritis.
4. melena.

Answer: c

Objective: 16-1

Reference: 502

23. Abdominal aortic aneurysm (AAA) is a true emergency because it can lead to:

1. sudden death.
2. severe pain.
3. moderate blood loss.
4. vomiting.

Answer: a

Objective: 16-1

Reference: 504

24. The most common GI problem that OEC Technicians encounter is:

1. constipation.
2. indigestion.
3. colic.
4. gastroenteritis.

Answer: d

Objective: 16-1

Reference: 505