CTRN Sample Questions

The following 10 sample questions are presented to demonstrate the format used on the CTRN exam and how questions reflect the nursing process. These sample items are not intended to reflect the difficulty of the actual questions on the CTRN exam. The preferred response is indicated in boldface type.

1. Which of the following attributes is likely to be noted by a nurse in evaluating a transport team member for fatigue?

A. irritability
B. nervousness
C. vomiting
D. pallor

2. Which of the following is the most accurate and available way to verify correct positioning of an endotracheal tube?

A. capnography
B. pulse oximetry
C. auscultation of breath sounds
D. visualization of the endotracheal tube passing through the vocal cords

3. The transport nurse is assessing the airway of a patient who is sitting up with his mouth wide open. The nurse can see the soft palate, uvula, and fauces but not the tonsillar pillars. What is the Mallampati score associated with this oropharyngeal view?

A. I
B. II
C. III
D. IV

4. In what position should a patient with extensive facial fractures be transported?

A. supine with cervical and complete spinal immobilization
B. supine with cervical spine immobilization
C. high Fowler's position with cervical spine immobilization
D. low Fowler's position with cervical spine immobilization

5. A patient who was ejected from a motor vehicle presents with retro auricular hematoma, otorrhea, and periorbital ecchymosis. The nurse suspects

A. cerebral herniation.
B. orbital blow-out fracture.
C. subdural hematoma.
D. basilar skull fracture.

6. A patient taking warfarin (Coumadin) for anticoagulation has an intracerebral hemorrhage and an INR of 2.7. The transport nurse should anticipate administering

A. calcium chloride.
B. protamine sulfate.
C. tranexamic acid (Cyklokapron).
D. fresh-frozen plasma.

7. A patient involved in a motor vehicle crash 24 hours ago sustained chest injuries that required a massive blood transfusion. The nurse is now preparing the patient for transport. Assessment reveals worsening dyspnea and cyanosis that requires intubation and mechanical ventilation with high levels of positive end-expiratory pressure (PEEP) to maintain oxygen saturation levels. The nurse recognizes that the patienthas

A. acute respiratory distress syndrome.
B. an acute pulmonary embolism.
C. ventilator-acquired pneumonia.
D. tension pneumothorax.

8. Follow-up and feedback programs for user agencies should be constructed so that the focus is

A. quality improvement.
B. training and education.
C. system collaboration.
D. expansion of services.

9. A transport nurse is assisting with rapid sequence intubation of a 21-year-old man prior to transport. During administration of succinylcholine (Anectine), masseter muscle spasms develop, and the cardiac monitor shows ventricular tachycardia. Vital signs are as follows: RR 46 breaths/min, ETCO2 60 mm Hg, and oxygen saturation 84%. The nurse prepares to administer dantrolene sodium (Dantrium) while simultaneously treating the life- threatening dysrhythmia with which of the following medications?

A. procainamide (Pronestyl)
B. lidocaine (Xylocaine)
C. digoxin (Lanoxin)
D. verapamil (Cardizem)

10. A high-risk obstetrics team is sent to a small community hospital for a precipitous delivery in the emergency department. The patient is now being transported for a retained placenta. En route, the nurse should expect to continue to

A. maintain the patient in the left lateral position.
B. perform fundal massage every 5 to 10 minutes.
C. initiate an infusion of magnesium sulfate.
D. administer tebutaline (Brethine) every 15 minutes.