

Pre/Post Test Questions for COVID 19 TOT : ORHB in Association with OPA and IOHPA

1. What trait do SARS-CoV-1 and SARS-CoV-2 share?
 - a. **They both bind to the hACE2 receptor in the respiratory tract using “spike proteins**
 - b. They are both parasitic infections
 - c. They both originated from Saudi Arabia
 - d. They have similar case fatality rates
2. Which of the following does COVID 19 cause?
 - a. Mild uncomplicated illness
 - b. Sepsis
 - c. ARDS
 - d. **All of the above**
3. You are evaluating the breathing of a patient. They are awake and speaking but you notice their SpO₂ is 86%. What is the next step?
 - a. Intubate immediately
 - b. **Place on supplemental oxygen**
 - c. Move on to circulation
 - d. Wait and see if it improves
4. What are the three steps of screening in the correct order?
 - a. Identify, Immobilize, Inform
 - b. Immobilize, Inform, Identify
 - c. Inform, Identify, Isolate
 - d. **Identify, Isolate, Inform**
5. What are the strategies to reduce potential spread of COVID-19 in the waiting room?
 - a. Masks for symptomatic patients
 - b. Distancing of symptomatic patients at least 1 meter from others
 - c. Signs instructing patient how to protect other when they cough
 - d. **All of the above**
6. What does social stigma related to health lead people to?
 - a. **Hide signs of illness to avoid discrimination**
 - b. Seek out specialty medical care
 - c. More quickly adopt health behaviors
 - d. Discuss their illness on social media
7. Which of the following can affect the R₀/overall transmissibility of COVID-19?
 - a. Proportion of population susceptible
 - b. Biological characteristics of pathogen
 - c. Public health measures implemented
 - d. **All of the above**
8. Who are most likely to experience severe disease from COVID-19?
 - a. Children
 - b. Young adult
 - c. **Older adults with underlying health conditions**
 - d. Everyone is equally likely to experience severe disease
9. Which of the following tests should ideally be used to confirm diagnosis of COVID-19?
 - a. **RT-PCR of respiratory specimen**

- b. RT-PCR of blood specimen
 - c. CT scan of chest
 - d. Evidence of clinical symptoms
10. When developing an infection prevention and control team (IPC), which of the following actions should be taken?
- a. Assignment of specific titles, roles, and responsibilities to each member of the team
 - b. Conducting ongoing training and status updates via a clear line of communication
 - c. Updating healthcare workers and members of the team as the outbreak evolves on a periodic basis
 - d. All of the above**
11. What is the suggested length of quarantine for healthcare workers who were at high risk of contracting COVID-19?
- a. 1 day
 - b. Until they are no longer symptomatic
 - c. 14 days**
 - d. 7 days
12. A patient arrives in septic shock. You begin antibiotics and have given 30 ml/kg of Ringer's lactate. The mean arterial pressure (MAP) is 57 mmHg. The patient is suspected to have COVID-19 and has been having some difficulty breathing due to the infection. What is the next step?
- a. Give 1L D5 normal saline
 - b. Give 2L Ringer's lactate
 - c. Begin vasopressors**
 - d. Give 1L 5% albumin
13. Which of the following medications would be your first choice in septic shock?
- a. Vasopressin
 - b. Phenylephrine
 - c. Dobutamine
 - d. Noradrenaline/Adrenaline**
14. Using non-invasive ventilation is helpful but it can aerosolize COVID-19 particles
- a. True**
 - b. False
15. You are preparing to intubate a patient in severe respiratory distress. What is the very first step?
- a. Making sure you are wearing the appropriate PPE**
 - b. Check a blood gas
 - c. Preoxygenate the patient
 - d. Pick up the laryngoscope
16. You diagnose a patient with severe pneumonia. Which of the following is NOT a criterion for severity?
- a. Hypoxia to SpO₂ 85%
 - b. Presence of respiratory distress
 - c. Extremely high white blood cell count**
 - d. Tachypnea >30/min
17. A very sick patient who is barely breathing (8/min) and very hypoxic arrives to your hospital. What is the first step in management?

- a. Check blood pressure
 - b. Begin vasopressor therapy
 - c. Assess airway and attempt to remove any obstruction**
 - d. Call for a chest x-ray
18. When working to diagnose patients with COVID-19, where is sample regularly taken?
- a. Upper respiratory tract**
 - b. Stool
 - c. Urine
 - d. Serum
19. Induced sputum should be obtained from all patients with suspected COVID-19 infection, as this provides the best chance of making the diagnosis.
- a. True
 - b. False**
20. In hospitalized patients, repeat testing of upper respiratory tract samples should be performed to confirm viral clearance.
- a. True**
 - b. False
21. Which of the following is recommended when caring for someone diagnosed with COVID-19 at home?
- a. Place the patient in a well-ventilated single room
 - b. Limit patient movement around the house
 - c. Household members should stay in a different room
 - d. All of the above**
22. Mothers who are breastfeeding and are diagnosed with COVID-19 should be told to stop breastfeeding for the health of their child.
- a. True
 - b. False**
23. Which of the following is NOT among supportive care for patient diagnosed with COVID-19?
- a. Routine administration of Corticosteroids**
 - b. Supplemental oxygen
 - c. Empiric antimicrobial therapy
 - d. Intravenous fluids
24. Which of the following is NOT recommended for treatment in a COVID-19 patient with hypoxemic respiratory failure and ARDS on mechanical ventilation?
- a. Tidal volume 6ml/kg
 - b. High PEEP
 - c. Low PEEP**
 - d. Prone positioning
25. What is a “probable case” of COVID-19, as defined by the WHO?
- a. A patient with acute respiratory illness AND with no other etiology that fully explains the clinical presentation AND a history of travel to or residence in a country, area or territory that has reported local transmission of COVID-19 during the 14 days prior to symptom onset

- b. A person with laboratory confirmation of infection with the COVID-19 virus, irrespective of clinical signs and symptoms
 - c. Any person who is currently under investigation for having the virus that causes COVID-19, or who was under investigation but tested negative for the virus
 - d. A suspected case for whom the report from laboratory testing for the COVID-19 virus is inconclusive**
26. According to the WHO, who is considered a COVID-19 contact?
- a. Providing direct care for patient with COVID-19 while using proper personal protective equipment
 - b. Sharing a classroom with a patient with COVID-19**
 - c. Travelling on an airplane and sitting five seats away from a patient with COVID-19
 - d. All of the above
27. Advising a COVID-19 contact to self-monitor for symptoms and contact their local public health department if they develop symptoms within 14 days after the last exposure is an example of:
- a. Passive follow up**
 - b. Active follow up
 - c. Sentinel follow up
 - d. Surveillance follow up
28. Which of the following would meet the current case definition for a “suspected case”?
- a. 61 year old female with nausea, vomiting and diarrhea in a healthcare worker
 - b. 27 year old male with cough, congestion with no travel history in a region where there is no community spread of COVID-19
 - c. 56 year old male complaining of a sprained ankle with recent travel to Iran
 - d. 76 year female with fever and cough after returning from Northern Italy**
29. What is the goal of triage?
- a. Move the least sick patients back first as they are the fastest to treat
 - b. Organize arriving patients in alphabetical order to maintain a clear record
 - c. Identify patient’s acuity level and prioritize care for the sickest**
 - d. None of the above
30. What is the definition of a “surge site”?
- a. A location to be used for medical care during times when need for care outstrips the available supply at routinely used sites**
 - b. A site which is used at all times in daily hospital operations
 - c. A site at which the surge is occurring
 - d. A command center in the hospital for disaster management operations