

TCCC QUIZ AIRWAY MANAGEMENT AND RESPIRATION

1. What does A mean in MARCH?
2. What is one of the most common forms of airway obstruction?
3. What are the procedures for aiding an unconscious casualty with no airway obstruction?
4. What are the actions for aiding a casualty with an airway obstruction?
5. What does R mean in MARCH?
6. When should you consider the use of a NCD?
7. Using a 14 gauge needle, where should the NCD be placed?
8. Where should a Second NCD be placed?
9. How do you unclog a NCD?
10. How should sucking chest wounds be treated?

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1. What does A mean in MARCH?
 - a. Conscious casualty with no airway problem identified:
 - b. • No airway intervention required
 - c. Unconscious casualty without airway obstruction:
 - d. • Place casualty in the recovery position
 - e. • Chin lift or jaw thrust maneuver
 - f. • Nasopharyngeal airway
 - g. • Extraglottic airway
 - h. c. Casualty with airway obstruction or impending airway obstruction
 - i. • Allow a conscious casualty to assume any position that best protects the airway, to include sitting up and/or leaning forward.
 - j. • Use a chin lift or jaw thrust maneuver
 - k. • Use suction if available and appropriate
 - l. • Nasopharyngeal airway
 - m. • Extraglottic airway (if the casualty is unconscious)
 - n. • Place an unconscious casualty in the recovery position
2. What is one of the most common forms of airway obstruction?
 - a. If the patient is semi-conscious or unconscious, the tongue is the most common source of airway obstruction.
3. What are the procedures for aiding an unconscious casualty with no airway obstruction?
 - a. Inspect mouth and remove foreign objects from airway to lip
 - b. Do not conduct blind finger sweeps.
 - c. Use Chin lift or jaw thrust maneuver to open the airway
 - d. Nasopharyngeal airway
 - e. Place unconscious casualty in the recovery position
4. What are the actions for aiding a casualty with an airway obstruction?
 - a. Inspect mouth and remove foreign objects from airway to lip
 - b. Do not conduct blind finger sweeps
 - c. Chin lift or jaw thrust maneuver
 - d. Nasopharyngeal airway
 - e. Allow casualty to pick the position that best protects the airway.
 - f. Place unconscious casualty in the recovery position.
5. What does R mean in MARCH?
 - a. Respiration
 - b. In the conscious patient, who is alert and breathing normally, no interventions are required.
 - c. Check for any holes in the torso by exposing the chest and checking the neck, chest, and back for holes. Patch holes by applying a chest seal or applying direct

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pressure to the hole. Check the sternum for any broken bones. Inspect the rib cage.

6. When should you consider the use of a NCD?
 - a. In a casualty with progressive respiratory distress and known or suspected torso trauma, consider a tension pneumothorax.
7. Using a 14 gauge needle, where should the NCD be placed?
 - a. The anterior site is the second intercostal space at the mid clavicular line, lateral to the nipple line.
 - b. The lateral site is the fifth intercostal space at the anterior axillary line.
8. Where should a Second NCD be placed?
 - a. It should be placed next to the first NCD over the rib because of vessels, nerves, and artery on the bottom side
9. How do you unclog a NCD?
 - a. Turn the needle 1/2 turn and listen for a whoosh. Take a 10cc needle filled with NACL and flush it.
10. How should sucking chest wounds be treated?
 - a. All open and/or sucking chest wounds should be treated by:
 - b. Applying a vented chest seal (preferred)
 - c. Applying a non-vented chest seal
 - d. Burp the wound if indicated for breathing difficulty Initiate pulse oximetry monitoring. Monitor for tension pneumothorax.