

Bronze Medallion Theory

Multiple Choice Questions

Reference: Surf Lifesaving Training Manual 33rd edition

Safety and Wellbeing

- Q1 The OH&S act ensures:
- Employers provide a happy and safe workplace
 - Employers provide a safe and healthy workplace for employees
 - Employees can overrule their employers on safety
 - Employers can impose penalties for unsafe practices performed by employees
- Q2 Volunteer members have a responsibility to:
- Follow all safety directions of patrol captains
 - Use patrol equipment at the surf club when they want to in designated areas
 - Leave faulty equipment out for use
 - Turn up on time for patrols
- Q3 Duty of care means:
- Accepting responsibility for other people's mistakes
 - Giving out advice and relevant accident forms to injured members
 - Having a working knowledge of OH&S rules
 - Accepting responsibility for health and safety in workplace
- Q4 What things can influence the fitness of a lifesaver:
- Diet, alcohol and smoking
 - Diet, exercise and smoking
 - Exercise, stress and diet
 - Smoking, alcohol and exercise
- Q5 What is the percentage of fats and oils that should be included in the normal diet:
- 10-15%
 - 12-15%
 - 25-30%
 - 30-35%
- Q6 When using sunscreen you should firstly apply it:
- Immediately before going into the sun
 - At least 20 minutes before going out into the sun
 - When you are on the beach and then every two hours after
 - When you remember
- Q7 Blood alcohol levels remain high for how long after the last drink?:
- 12-20 hours
 - 1-5 hours
 - 30 minutes
 - 6-10 hours

- Q8 Which of the following is not a guide for SLISA in establishing OH&S guidelines:
- Legislation such as acts of parliament
 - Regulations like the rules that deal with certain issues in greater detail than are contained in acts
 - The cost of work place illness and injury such as organisational
 - Codes of Practices including standards set by an industry for an industry
- Q9 Which of the following is not the way to make sure you meet the highest standards of personal hygiene:
- Limit the jewellery that you wear
 - Long hair must be tied back
 - Clean your teeth regularly
 - Wash you hands regularly, especially after treating a patient
- Q10 Which of the following is not part of environmental hygiene and keeping your workplace free from clutter or conditions that allow bacteria and vermin to thrive?
- Follow correct storage and garbage removal procedures
 - Maintain and clean equipment at the highest standard of hygiene
 - Carry personal hygiene kits (bum bags) with gloves and mask when on patrol
 - Wash your hands regularly, especially after treating a patient
- Q11 Which of the following is not a hazard that can cause injury or harm in the workplace?
- Crowd control such as crowd infringing on patrol members working on a patient
 - Spills and slippery surfaces like water, food and oil
 - Incorrect storage including flammable materials having special storage requirements
 - Environmental such as sun exposure
- Q12 A fully laden IRB should be lifted by a minimum of:
- 2 people
 - 3 people
 - 4 people
 - 5 people
- Q13 An outboard motor should be lifted by a minimum of:
- 1 person
 - 2 people
 - 3 people
 - 4 people
- Q14 Which of the following causes of injury does not lead to a sprain or strain:
- Heavy loads
 - Incorrect lifting
 - Traumatic stress
 - Using equipment incorrectly

Q15 Which of the following is not a stage of risk management principles:

- a. Hazard control
- b. Hazard maintenance
- c. Hazard assessment
- d. Evaluation/monitoring

Q16 Who has the responsibility for health and safety in the surf club:

- a. Club president
- b. Club captain
- c. Everybody
- d. OH&S officer

Surf Awareness and Skills

Q17 The average interval between two successive high tides is:

- a. 7 hours and 30 minutes
- b. 10 hours
- c. 13 hours
- d. 12 hours 25 minutes

Q18 A poor swimmer caught in a rip should swim:

- a. Parallel to the shore for 30-40 metres
- b. At a 45 degree angle to the beach
- c. Further out to sea then parallel to the shore
- d. Wait for a lifesaver to rescue them

Q19 A rip current:

- a. Can be used to go out to sea
- b. Should be avoided at all times
- c. Only for strong swimmers
- d. Is easy to identify when windy

Q20 How is a rip current formed?

- a. By water seeking its own level
- b. By the tide
- c. Stormy conditions
- d. Wind

Q21 The names for the four types of rips mentioned in the manual are:

- a. Permanent, fixed, travelling, littoral
- b. Permanent, fixed, flash, travelling
- c. Permanent, flash, sidewinder, fixed
- d. Fixed, flash, travelling, longshore

Q22 High tide:

- a. Is caused by a big surf
- b. Is caused by wind strength and direction
- c. Normally occurs twice a day
- d. All of the above

Q23 Plunging waves:

- a. Are usually called 'dumpers'
- b. Do not lose speed or gain height
- c. Gain height and form a tube before breaking
- d. Are best for body surfing

Q24 Waves are formed by:

- a. The wind
- b. Tidal movement
- c. Sand banks
- d. Water seeking its own level

Q25 Common signs of a rip current are:

- a. Spilling waves breaking evenly along the beach
- b. Plunging waves breaking evenly along the beach
- c. Discoloured brown water, foam and debris floating seaward
- d. Discoloured brown water, foam and debris floating towards the shore

Q26 Inshore holes:

- a. Contain water meeting its own level travelling seaward
- b. Are made by large sets of waves coming onto the shore and doubling up
- c. Are deep pockets of water close to shore and are a problem to unsuspecting bathers and small children
- d. Can be escaped from by swimming 45 degrees to the rip, and after clearing the rip, swimming back to shore

Q27 Which beach type generally has a safety rating of "low danger":

- a. Low tide terrace
- b. Long shore trough
- c. Dissipative
- d. Reflective

Q28 Seas generally reach their highest level on the shore:

- a. Once a day
- b. Four times a day
- c. Twice a day
- d. Once a week

Q29 A fixed rip is best described as:

- a. Remaining in same area for months or years
- b. Temporary in nature and caused by large sand build up
- c. A gully or hole on ocean floor with sand as its primary base
- d. Propelled along beach frontage by strong littoral current

Q30 A permanent rip is best described as:

- a. Remaining in same area for months or years
- b. Temporary in nature and caused by large sand build up
- c. A gully or hole on ocean floor with sand as its primary base
- d. Propelled along beach frontage by strong littoral current

- Q31 A flash rip is best described as:
- Remaining in same area for months or years
 - Temporary in nature and caused by large sand build up
 - A gully or hole on ocean floor with sand as its primary base
 - Propelled along beach frontage by strong littoral current
- Q32 A travelling rip is best described as:
- Remaining in same area for months or years
 - Temporary in nature and caused by large sand build up
 - A gully or hole on ocean floor with sand as its primary base
 - Propelled along beach frontage by strong littoral current
- Q33 The lifesaver takes note of a prominent landmark before entering the water because that
- Can be used as a guide for maintaining a fixed position
 - Need to select an alternate observation point for surveillance patrol
 - Are interested in timing their swim distance
 - Expect to see a patrol person there

The Human Body

- Q34 Artery walls are:
- Thin walled and near surface of the skin
 - Strong, muscular and elastic
 - Strong tiny vessels
 - Strong and close to skin
- Q35 Damage from lack of oxygen to the brain begins in:
- Less than 4 minutes
 - 3 minutes
 - 1-2 minutes
 - More than 5 minutes
- Q36 The mobile parts of the spinal column are:
- Coccyx and sacrum
 - Vertebrae
 - Thoracic and lumbar
 - Ligaments
- Q37 The breathing control centre is located:
- Front of brain
 - Base of brain
 - In the lungs
 - In the medulla
- Q38 Blood escaping from an artery is:
- Bright red and oozing
 - Dark red and oozing
 - Bright red and spurting
 - Dark red and spurting

- Q39 The trachea and alveoli are part of the
- Cardiovascular or circulatory system
 - Musculo skeletal system
 - Respiratory system
 - Nervous system
- Q40 Oxygen is transferred from inhaled air to the blood in the air sacs of the:
- Heart
 - Capillaries
 - Arteries
 - Lungs
- Q41 The heart's primary function is to pump blood to which two main areas?
- Lungs and heart
 - Lungs and rest of body
 - Main arteries and the aorta
 - Capillaries and lungs

First Aid

- Q42 One of the most important but often neglected aspects of first aid treatment is:
- Calling for help
 - Reassuring the patient
 - Checking for danger
 - Assessing the patient
- Q43 First aid rooms must be...:
- Painted regularly
 - Locked at all times
 - Spotlessly clean
 - Manned constantly
- Q44 Checking for Signs of Life involves:
- Feeling for pulse
 - Feeling for pulse and observing patient's colour
 - Looking for movement, responsiveness, consciousness & breathing
 - Feeling for breathing
- Q45 If gloves are not available to treat a bleeding patient they should:
- Refrain from treating the patient
 - Tell patient how to stop his or her own bleeding
 - Find another lifesaver to treat patient
 - Treat patient and make sure you wash hands with warm soapy water
- Q46 Arterial tourniquets should be used:
- For shark attacks
 - For crocodile attacks
 - Only as a last resort
 - For powercraft injuries

- Q47 Symptoms of shock include:
- Rapid, weak pulse
 - Confusion
 - Pale, cold clammy skin
 - Breathless and nausea
- Q48 'RICER' is a basic treatment for:
- Compound fractures
 - Cramps
 - Shoulder dislocation
 - Ligament injuries
- Q49 What is the correct treatment for a nose bleed:
- Stand patient up, tilt patients head backwards, apply cold compress to forehead
 - Lay patient down in recovery position, apply soft bandage to nose
 - Lay patient on back, elevate knees, reassure patient
 - Sit patient down, tilt head forward, squeeze soft part of nostrils
- Q50 What is the definition of shock?
- Loss of effective circulation
 - Severe injury
 - A reaction of a traumatic event
 - Severe infection
- Q51 When should you wear protective gloves?
- When on patrol
 - When completing first aid documentation
 - For every first aid case
 - When rescuing a patient
- Q52 In a secondary assessment you need to look, listen and feel. What are you feeling for:
- Any movement of air from patient's mouth or nose
 - Deformity, texture, temperature or swelling
 - Patient's breathe on your cheek
 - Patient's responses and sounds
- Q53 What width should an arterial tourniquet be at least:
- 10 cm
 - 5 cm
 - 2.5 cm
 - 15 cm
- Q54 Symptoms of a fracture:
- Pain and tenderness
 - Possible bleeding at wound site
 - Deformity and swelling at site
 - Possible discolouration

- Q55 How many vertebrae in the spinal column:
- 13
 - 33
 - 26
 - 40
- Q56 Most deaths from heart attacks occur:
- In 1-2 hours after attack
 - In 15 – 30 minutes after attack
 - Within 24 hours of attack
 - Within 1 hour of attack
- Q57 In what order is a body checked?
- Lay patient in a recovery position and question as to injuries
 - Lay patient on stretcher, move directly to first aid room
 - Turn patient to stable position, check neck, head, and face and continue down body
 - Turn patient to stable position, check back and spine for injury
- Q58 What is the most correct procedure for first aid documentation?
- Gather information from bystanders and record in patrol log book
 - Record events as witnessed, signed by first aider and kept on file
 - Check with patient as to cause of injury, ensure next of kin notified and verbally pass information onto ambulance/paramedics
 - Record all events as stated by bystanders and ensure patient signs as correct record
- Q60 The most appropriate fluid to give a conscious patient suffering from hypothermia is:
- Cool fresh water
 - Sweet carbonated drinks
 - A small amount of alcohol
 - Warm, sweet drinks
- Q61 The treatment of a sprain
- Immobilise
 - Stretch the muscle
 - Apply ice, elevation and compression
 - Apply heat, elevation and compression
- Q62 According to the SLSA Training Manual, if you need to use a tourniquet you should note the time of application and release and reapply the tourniquet every
- 30 minutes
 - It should not be removed until specialist medical care arrives.
 - 15 minutes
 - 10 minutes

- Q63 The treatment of a major fracture to a limb includes:
- Immobilising the injured limb in as natural a position as possible
 - A compression bandage layered away from the heart over the site to restrict swelling
 - Always splinting to another limb
 - Elevation of the limb and giving pain relieving medication
- Q64 After managing life threatening problems the casualty should be examined in which order:
- Head, arms, chest, back, abdomen and legs
 - Head, chest, arms , abdomen, legs and back
 - Head, chest, abdomen, arms, legs, back
 - Head, arms, legs, abdomen, chest, back
- Q65 The treatment for a conscious patient who has suffered chest pains includes:
- Place patient in a comfortable position, leaning forward pinching the nostrils and encourage breathing with short breaths to alleviate pain
 - Loosen clothing, place patient on back with head and shoulders slightly raised and a blanket under the knees
 - Place patient on side as soon as possible, manage any injuries, monitor ABC and seek medical aid
 - Place patient in a comfortable position, give oxygen therapy, loosen tight clothing, reassure the patient
- Q66 Two main mechanisms involved in neck injuries effecting surf lifesavers (aquatic injuries) are:
- Forward bending (flexion) and horizontal compression
 - Vertical extension and backward bending (flexion)
 - Vertical compression and forward bending (flexion)
 - Vertical compression and backward bending (flexion)

Resuscitation

- Q67 List stages in the chain of survival:
- Early CPR, early defib, early access, early emergency assistance
 - Early access, early CPR, early advanced life support, early defib
 - Early access, early CPR, early defib, early advanced life support
 - Early access, early defib, early advanced life support, early emergency assistance
- Q68 When performing mouth to mask resuscitation which is the preferred jaw lift:
- Jaw support
 - Pistol grip
 - Jaw thrust
 - Either method

- Q69 False teeth or dentures should be removed:
- When performing CPR
 - Only if they are loose and interfering with airway
 - Only if there is a doctor or nurse to remove them
 - If the patient has a physical airway problem like having a long thin face
- Q70 When performing CPR and an airbag resuscitator and defibrillator are being used, who is in charge of the whole procedure?:
- Patrol captain
 - airbag operator
 - Defib operator
 - CPR operator
- Q73 How is jaw lift achieved?
- By jaw support or jaw thrust
 - By tilting patients head backwards only
 - By placing a mask on a patients face
 - By supporting the patients neck
- Q74 During two – person assessment who make the decision on whether the person is breathing?
- The person delivery breaths
 - The Patrol Captain
 - Both A & D
 - The person doing compressions
- Q75 What is the key to a successful resuscitation?
- Assessment of the patient
 - A clear airway
 - Backward head tilt
 - Pistol grip
- Q76 How do we check for breathing?
- Look, touch, feel
 - Look, listen, feel
 - Listen, look, touch
 - Touch, talk, listen
- Q77 What can add to lifesavers difficulties in assessing whether the patient is breathing?
- A brisk breeze
 - The noise of the sea
 - Noise of the crowd
 - All of the above

- Q79 An unconscious patient on the beach should be placed?
- Facing the clubhouse
 - Feet facing the ocean
 - Facing towards the sea
 - With head facing north
- Q80 What are the differences between CPR on an adult and an infant?
- Infants head is in the neutral position (no head tilt)
 - Only deliver cheek puffs not full breaths
 - Only use 2 fingers for compressions
 - All of the above
- Q81 Which of the following need not be sent to hospital?
- Any patient who has lost consciousness
 - Any patient who requires either CPR
 - Any person who has suffered a heart attack
 - Any patient who has suffered a nose bleed
- Q82 The preferred method for rescue breaths on an adult is
- Mouth to mouth
 - Mouth to mask
 - Mouth to nose
 - It doesn't matter the rescuer can chose
- Q83 If vomiting or regurgitation occurs during CPR you should:
- Abandon all resuscitation efforts and seek medical assistance
 - Roll the patient on their side, clear the airway and then reassess airway, breathing and circulation
 - Roll the patient on their side, clear airway and then continue resuscitation
 - Place the patient in the lateral position to allow for drainage of vomitus, phone ambulance for oxy viva with suction
- Q84 To inflate an infant's lungs you should:
- Fill your lungs and blow into the infant's mouth
 - Ensure they have maximum head tilt
 - Fill your cheeks with air and puff till their chest rises
 - Fill your lungs and blow into the infants nose
- Q86 With the patient lying on the side how far away should the CPR operator's cheek be from the patient's mouth?
- 8-10 cms
 - About 5 cms
 - About 10 cm
 - Doesn't matter how far

- Q87 Mouth to nose rescue breaths are likely to be more effective than mouth to mouth when
- The patient has dentures
 - The patient has swallowed a lot of water
 - The patient has severe facial injuries
 - The airway is obstructed
- Q88 The ribs meet:
- Above the xiphisternum
 - Below the xiphisternum
 - At the same level of the xiphisternum
 - On the xiphoid
- Q89 What could be happening if the stomach is rising instead of the chest?
- You are blowing into the stomach instead of the lungs
 - The patient has swallowed something
 - You don't have a clear airway
 - Both A & C
- Q90 Oxygen therapy uses which setting on the Oxyviva unit?
- Either one
 - 15 litres per minute
 - 30 litres per minute
 - 8 litres per minute
- Q92 In CPR the depth of compression for a 7 year old child:
- Exactly 2-3 cms
 - Approximately 1-2 cms
 - 2/3 depth of chest
 - 1/3 depth of chest
- Q93 Oxygen therapy is only used for:
- Patients who are unconscious and not breathing
 - Patients after resuscitation
 - Patients who have a pulse but are not breathing
 - Patients who are breathing
- Q94 Depth of compression for an adult is?
- 3 – 4 cm
 - 5 – 6 cm
 - 6 – 7 cm
 - 1/3 depth of chest
- Q95 Depth of compression for an infant is?
- Until fluid comes out of their mouths
 - 1 – 2 cm
 - 2 – 3 cm
 - 1/3 depth

Q96 Compression method for an adult is?

- a. 2 fingers
- b. 1 hand
- c. 2 hands
- d. Whatever works

Q97 Compression method for a child is?

- a. 2 fingers
- b. 1 hand
- c. 2 hands
- d. Whatever works

Q98 Compression method for an infant is?

- a. 2 fingers
- b. 1 hand
- c. 2 hands
- d. Whatever works

Q99 Oxygen therapy should be administered to an unconscious breathing patient in the following position:

- a. The lateral position
- b. The patient is on his/her back
- c. The most comfortable position
- d. The patient's head raised slightly

Q100 What is the survival rate of patients who receive defibrillation within 2 minutes of cardiac arrest?

- a. 90 %
- b. 20%
- c. 60%
- d. 10%

Q101 What is the percentage of oxygen in the air we breath?

- a. 21 %
- b. 5%
- c. 16%
- d. 30%

Q102 What is the normal heart rate range for a well perfused adult?

- a. More than 100 beats per minute
- b. 60-100 beats per minute
- c. less that 60 beats per minute
- d. 100-150 beats per minute

Q103 The heart is compressed between the:

- a. Sternum and spine
- b. Sternum and the breastbone
- c. The ribs and the spine
- d. Sternum and the vertebrae

Communications

Q104 To communicate effectively we need to clearly work out:

- a. The purpose, audience and the best form of the communication
- b. Whether to use words, body language or graphic symbols to communicate what we want
- c. What some of the barriers to communicating effectively could be
- d. That the terminology we use will be understood by others

Q105 What are the five skills needed to ensure effective communication:

- a. Observe, listen, think, summarise and respond
- b. Pay attention, observe, listen, summarise and respond
- c. Non-hearing, hearing, listening, thinking and responding
- d. Exchange information, concentrate, participate in open-ended discussions, listening and reading body language

Q106 Warning signs are always:

- a. Diamond shape with black border and yellow ground
- b. Diamond shape with black border and white ground
- c. Round shape with red annulus and bar on white ground
- d. There is no particular shape or colour

Q107 Information signs are always

- a. Diamond shape with black border and yellow ground
- b. Square shape with blue ground
- c. Square shape with blue drawings with white ground
- d. There is no particular shape or colour

Radio Communications

Q108 UHF is the main means of radio communication within SLSA as the UHF band because it:

- a. Is easier to operate
- b. Gives clear voice reproduction
- c. Is cheaper and can be easily purchased around Australia
- d. Was the only system available at the time

- Q109 In a rescue situation the Patrol Captain should pass on the following information to the Surf Rescue Command or base station
- Prevention, people, performance, progress
 - Position, problem, people, progress
 - Progress, position, persistence, people
 - Position, problem, people, performance
- Q110 You have radioed the Surf Rescue Command or radio base and have been requested to "Stand By". Do you:
- Close down your radio
 - Call your Patrol Captain
 - Transmit your message
 - Wait for a reply
- Q111 The emergency call for SLSA is:
- Radio base, this is ... Surf Club
 - Mayday, mayday, mayday
 - Rescue, rescue, rescue
 - Emergency, emergency, emergency
- Q112 To avoid interference on the radio you should:
- Check the surf conditions for potential problems to report
 - Listen to make sure others are not using the channel
 - Always say "RESCUE RESCUE RESCUE" to clear the channel
 - Check that all equipment on the beach is functional
- Q113 If a radio is accidentally dropped in water and is found to be damaged, before you send the radio to be serviced you should:
- Check for water penetration, turn radio off, remove battery, wipe the radio with a cloth and dry in the sun
 - Check for damage to antenna, turn radio off, remove battery, submerge the radio in fresh water and dry with a cloth
 - Turn radio off, remove from bag or case, submerge the radio in fresh water and air dry
 - Turn radio off, check for water penetration, remove battery, spray the radio with water repellent and air dry
- Q114 When using the radio, you should:
- Talk whenever you want, the other radios will hear you
 - Transmit on any channel, the radio base has a scanner
 - Press the transmission button, speak slowly and clearly
 - Press the transmission button to transmit and receive

Rescue Techniques

- Q115 The safest position for the rescuer and a rescue board in relation to a patient is
- a. On the seaward side of the patient
 - b. On the shoreward side of the patient
 - c. Three metres from the patient
 - d. Five metres from the patient

- Q116 The key to release and escape techniques used against a panicking patient is
- a. The greater strength of the rescuer
 - b. The element of surprise
 - c. The person will quickly become exhausted
 - d. The person will not want to go underwater

Carries and Supports

- Q117 What is the preferred method of moving a suspected spinal patient from the water?
- a. Three person carry
 - b. Spinal injury carry
 - c. Spinal board carry
 - d. Two handed seat carry