

Chapter 7 - Spinal Column and Spinal Cord Injuries Test Questions

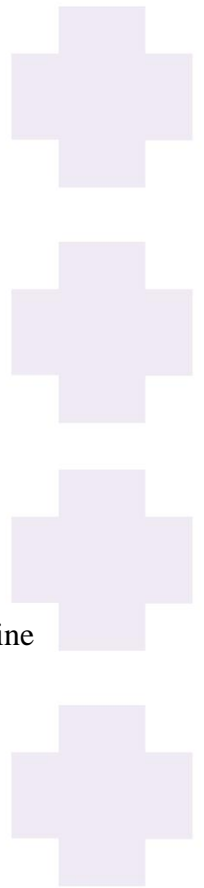
1. Spinal cord injury is significant in the United States because:
 - a. Despite low incidence, it carries a high economic burden
 - b. Primarily is the result of a violent event
 - c. Reduced life expectancy is common
 - d. It primarily occurs in older persons

2. The Autonomic Nervous System (ANS) is important in acute spinal cord injury because:
 - a. The parasympathetic branch is disrupted producing neurogenic shock
 - b. The sympathetic branch is disrupted producing neurogenic shock
 - c. The hypothalamus is injured producing neurogenic shock
 - d. The ANS is not important because it is part of the peripheral nervous system

3. The five major mechanisms of injury are:
 - a. Flexion, extension, axial loading, distraction, and laceration
 - b. Concussion, flexion, extension, rotation, and penetration
 - c. Flexion, extension, axial loading, rotation and penetration
 - d. Flexion, extension, concussion, distraction, and penetration

4. Central cord syndrome is:
 - a. A result of forces producing an injury in the periphery of the spinal cord
 - b. Most commonly occurs in older persons with degenerative changes of the cervical spine
 - c. Characterized by a disproportionate loss of lower extremity versus upper extremity function
 - d. Most often associated with penetrating injuries

5. The sensorimotor exam is performed:
 - a. To evaluate function of the lateral corticospinal, the lateral reticulospinal, and the lateral spinothalamic tracts
 - b. To assess sensory and motor function and strength bilaterally
 - c. Upon admission only to help localize level of injury
 - d. Routinely to assist patient's in recognizing the extent of their injury



6. The cardiovascular consequences of neurogenic shock include:
- Hypertension, tachycardia, and hyperthermia
 - Hypotension, bradycardia, and hypothermia
 - Hypotension, tachycardia, and hyperthermia
 - Hypertension, bradycardia, and hyperthermia
7. The signs and symptoms of autonomic dysreflexia include:
- Hypotension, tachycardia, sweating, and pallor
 - Hypertension, bradycardia, pallor, and flushing
 - Hypertension, tachycardia, flushing, and hyperventilation
 - Hypotension, tachycardia, pallor, and goosebumps
8. Frequent respiratory assessment is important in acute spinal cord injury because:
- Loss of defensive respiratory muscles places them at high risk for respiratory failure
 - Arterial blood gas results can be inaccurate in these patients
 - They frequently develop phrenic innervation, which can be worsened by the use of steroids
 - It is the third leading cause of death for quadriplegic patients
9. Which of the following statements is true regarding acute spinal cord injury and deep venous thrombosis?
- Infrequently at risk for DVT
 - Patients are at greatest risk the first two weeks post-injury
 - Prophylaxis need only be managed with anti-coagulation
 - All patients must have a prophylactic vena cava filter placed
10. Gastrointestinal management of a patient with an acute spinal cord injury should include:
- Gastric decompression, steroids, and gastric prophylaxis
 - Gastric decompression, steroids, and bowel stimulants
 - Gastric decompression, delayed nutrition due to risk of ileus, and bowel stimulants
 - Gastric decompression, gastric prophylaxis, early enteral feedings, and bowel stimulants
11. Unopposed vagal outflow places the acute spinal cord injured patient at greater risk for ulcer formation.
- True
 - False

12. Which of the following statements are true regarding bladder management of the acute spinal cord injured patient?
- Initial management avoids placement of an indwelling catheter
 - Bladder management is dependent upon level of injury, lifestyle, and gender
 - Urinary tract infections are an infrequent complication for SCI patients
 - 4000 ml/day fluid ingestion is encouraged during bladder training
13. A urinary tract infection (UTI) is definitively diagnosed by the presence of bacteriuria in SCI patients.
- True
 - False
14. Musculoskeletal implications of spinal cord injury include:
- Flaccidity, spasticity, and increased bone density
 - Spasticity, heterotopic ossification, and contractures
 - Heterotopic ossification, contractures and increased bone density
 - Flaccidity, contractures, and increased bone density
15. In acute spinal cord injury, pain is:
- Not an issue due to the loss of sensation
 - Should be treated with long-acting medications
 - Is frequently exacerbated by fear and anxiety
 - Should not be treated to preserve exam
16. Chronic pain is a significant issue for spinal cord injured patients because:
- It may enhance ability to perform ADLs
 - Medication side effects are imagined
 - It diminishes the quality of life
 - It is not “real” pain
17. Which of the following statements regarding sexual function of the cervical spinal cord injured person is true?
- Persons retain their psychogenic abilities
 - Females cannot experience normal fertility and pregnancy
 - Most males can achieve erection, but will not experience reflexive ejaculation
 - The physical act of intercourse remains impossible for most individuals