

	6403	Ketamine for Acute Pain Written Exam
Nor-Cal EMS Policy & Procedure Manual	Training/Skills	
Effective Date: 03/10/2021	Next Revision: 03/10/2024	
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Authority

Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9.

1. Paramedics are authorized to administer Ketamine for what indication(s) in the Nor-Cal EMS region?
 - a. Sedation
 - b. Analgesia
 - c. RSI
 - d. All of the above
2. Which of the following are contraindication(s) to Ketamine?
 - a. Known sensitivity/allergy
 - b. Chest trauma
 - c. Extremity trauma
 - d. Burns
3. The dose and route for administration of Ketamine is:
 - a. IM route and 4 mg/kg
 - b. IVP and 0.3 mg/kg
 - c. Slow infusion 0.1 mg/kg
 - d. Slow infusion over 5 minutes and 0.3 mg/kg
4. How rapidly can you infuse a dose of Ketamine?
 - a. IVP 5 seconds
 - b. 60 minutes
 - c. 5 minutes
 - d. 30 minutes?
5. Which of the following describes a typical set of vital sign changes in a patient who has received Ketamine?
 - a. Tachycardia, hypotension, tachypnea
 - b. Bradycardia, hypertension, respiratory depression
 - c. Tachycardia, hypertension, and tachypnea
 - d. Bradycardia, hypotension, respiratory depression
6. After you administer Ketamine to a patient, they exhibit stridor and his oxygen saturations begin to drop. You should?
 - a. Administer Narcan 0.4. To 2 mg IV
 - b. Ventilate him
 - c. Insert a supraglottic airway
 - d. Observe them closely only

7. The dose of intranasal Ketamine is:
 - a. 0.3 mg/kg
 - b. 0.2 mg/kg
 - c. 0.5 mg/kg
 - d. 1 mg/kg
8. After you administer Ketamine to a patient, they begin to vomit. After you suction their airway, you should administer?
 - a. Atropine 0.5 mg IV
 - b. Atropine 1 mg IV
 - c. 4 mg ondansetron IV
 - d. 4 mg ondansetron oral disintegrating tablet
9. One method of reducing the likelihood of an emergence reaction is?
 - a. Administer the Ketamine as rapidly as possible
 - b. Reassure the patient frequently that they will be okay
 - c. Reduce the amount of physical stimulation
 - d. Unlikely to occur at the doses being used in Nor-Cal EMS
10. The maximum single dose of Ketamine allowed in the Nor-Cal EMS Region is
 - a. 10 mg
 - b. 30 mg
 - c. 20 mg
 - d. 40 mg
11. In Nor-Cal EMS, a provider can administer Ketamine by which of the following routes?
 - a. IM only
 - b. SQ, IM, and IO
 - c. IV, IN
 - d. IVP
12. In Nor-Cal EMS you may administer Ketamine to what age ranges?
 - a. 12 years and above
 - b. 15 years and above
 - c. 8 years and above
 - d. 18 years and above
13. An absolute contraindication for Ketamine is?
 - a. Known or suspected alcohol use
 - b. Allergy/sensitivity to Ketamine
 - c. Pregnancy
 - d. All of the above
14. You can repeat the dose of Ketamine in 15 minutes if the pain scale is still 5 or greater.
 - a. True
 - b. False
15. You can repeat the dose of Ketamine in 15 minutes for both IV and IN dosing routes.

- a. True
 - b. False
16. The administration of medications via the intranasal route is inferior to the intravenous route.
- a. True
 - b. False
17. The ideal volumes for medication administration are 0.2 to 0.3 ml per nostril, however volumes up to 1 ml are acceptable.
- a. True
 - b. False
18. By dividing the dose in half and giving half to each nostril doubles the mucosal surface distribution and increases the absorption.
- a. True
 - b. False
19. You always need to intervene with non-pharmacologic interventions prior, during, and post analgesic administration.
- a. True
 - b. False
20. Examples of basic BLS non-pharmacologic interventions that are essential are:
- a. Splinting and wound care
 - b. Verbal reassurance and redirection
 - c. Ice
 - d. Elevation
 - e. All of the above