

S1. Theory Assessment Questions

Instructions to Participants

Answers must be completed on the answer sheet provided. The completed answer sheet **MUST** then be brought with you to your training session. Read each question carefully before answering and attempt all questions. Pass mark is 100%. NFA encourages you to use the online NFA textbook "Fun with First Aid", as your reference resource to assist you with this assessment. If you do not achieve the required pass mark your trainer/assessor will verbally assess you on the day to obtain additional evidence for competency in this unit of assessment. If you have any concerns or any special needs (including language, literacy, or numeracy) please discuss with your trainer/assessor before proceeding. Please sign and date the declaration on the next page.

S 1 <i>Theory Assessment (Answers).</i>											
Circle your response					Assessor	Circle your response					Assessor
					✓ x						✓ x
1	A	B	C	D	53	A	B	C	D		
2	A	B			54	A	B	C	D		
3	A	B			55	A	B	C	D		
4	A	B	C	D	56	A	B	C			
5	A	B	C	D	57	A	B	C	D		
6	A	B	C		58	A	B	C			
7	A	B	C		59	A	B	C			
8	A	B	C	D	60	A	B				
9	A	B			61	A	B	C	D		
10	A	B	C	D	62	A	B				
11	A	B	C	D	63	A	B	C	D		
12	A	B	C	D	64	A	B	C	D		
13	A	B	C		65	A	B	C	D		
14	A	B			66	A	B	C	D		
15	A	B			67	A	B	C	D		
16	A	B	C		68	A	B	C	D		
17	A	B	C		69	A	B	C	D		
18	A	B	C		70	A	B	C	D		
19	A	B	C	D	71	A	B				
20	A	B	C	D	72	A	B				
21	A	B	C	D	73	A	B	C			
22	A	B			74	A	B	C	D		
23	A	B	C	D	75	A	B				
24	A	B	C		76	A	B	C			
25	A	B	C	D	77	A	B	C	D		
26	A	B	C	D	78	A	B	C	D		
27	A	B	C	D	79	A	B	C			
28	A	B	C	D	80	A	B	C			
29	A	B	C	D	81	A	B	C	D		
30	A	B	C	D	82	A	B				
31	A	B	C		83	A	B	C			
32	A	B	C		84	A	B	C	D		
33	A	B	C	D	85	A	B	C	D		
34	A	B	C		86	A	B				
35	A	B	C	D	87	A	B	C	D		
36	A	B	C	D	88	A	B	C	D		
37	A	B	C		89	A	B	C	D		
38	A	B	C		90	A	B	C	D		
39	A	B	C	D	91	A	B				
40	A	B	C	D	92	A	B	C			
41	A	B	C	D	93	A	B	C	D		
42	A	B	C	D	94	A	B	C	D		
43	A	B			95	A	B	C	D		
44	A	B			96	A	B	C	D		
45	A	B	C	D	97	A	B	C			
46	A	B	C	D	98	A	B	C			
47	A	B			99	A	B	C	D		
48	A	B			100	A	B	C			
49	A	B			101	A	B	C	D		
50	A	B	C		102	A	B				
51	A	B	C	D	103	A	B	C	D	E	
52	A	B	C	D	104	A	B	C	D		

RESULT / 104

Participant Declaration – please sign

I hereby certify that I have completed all the theory questions above.

Signature of Participant:

Print Name:

Date:

General Questions

1. Your FIRST action at an emergency is to:

- A. Send for help – call 000
- B. Assess for Danger to yourself, bystanders, and the patient
- C. Check the Airway
- D. Check for Breathing

2. Under State & Territory Health and Safety legislations, there are specific Codes of Practice for First Aid in the Workplace that outline the requirements and contents of first aid kits at work.

- A. True
- B. False

3. In the event of a serious emergency and providing it is safe to do so, you should attempt to assist as best you can within your skills and limitations.

- A. True
- B. False

4. Which of the following conditions has priority?

- A. A young patient with a suspected fracture
- B. An elderly patient with chest pain
- C. A middle-aged patient with a deep cut to her arm
- D. An unconscious patient lying on his back

5. When managing a patient, you must:

- A. Be culturally aware and sensitive
- B. Communicate gently and in a respectful manner
- C. Be understanding, calm and reassuring
- D. All the above

6. Being involved in a first aid incident can be a high-stress situation for many people. After an emergency why should you take part in any debriefing session or stress management support offered by your workplace.

- A. Talking about what happened and what you did, and sharing experiences with others, will help you to cope with any stress or anxiety you may be going through.
- B. It could also help you and others to improve the way first aid duties are carried out.
- C. All the above

7. The work health and safety laws require a designated first aider in the workplace to understand they have a duty of care. A designated first aider is expected to assist and help in the event of an emergency, illness, or injury in that workplace.

- A. True
- B. False
- C. Sometimes

8. Which precautions can reduce the risk of cross infection when providing first aid?

- A. Using a resuscitation mask or face shield
- B. Being aware of blood and bodily fluids
- C. Wearing disposable gloves
- D. All the above

9. All patient first aid records in the workplace are to be kept confidential and secure unless requested by a legal authority, the patient, or an authorised person in the workplace.

- A. True
- B. False

10. Which of the following questions should you be prepared to answer when calling for help (000)?

- A. What is the exact location of the emergency?
- B. What is the phone number you are calling from?
- C. Is the patient conscious and breathing?
- D. All the above

Resuscitation / Cardiac Arrest

11. You should commence CPR when a patient is:

- A. Unconscious, Not Responding, Not Breathing Normally, Not Moving
- B. Unconscious, Breathing Normally, Not Responding, Not Moving
- C. Conscious, Responding, Breathing Normally, Moving
- D. All the above

12. The recovery position is lifesaving because it helps maintain a clear and open airway by:

- A. Causing the jaw and tongue to fall forward
- B. Allowing blood, vomit, or other fluid to drain, thereby minimising the risk of airway obstruction
- C. Reducing the risk of inhaling foreign material
- D. All the above

13. The 4 steps in the chain of survival are:

- A. Early Recognition, Early Defibrillation, Early Ambulance, Early Hospital Assistance
- B. Early Defibrillation, Early CPR, Early Ambulance Response, Early Medical Treatment
- C. Early Recognition, Early CPR, Early Defibrillation, Early Advanced Life Support

14. A first aider must commence chest compressions if the patient is unconscious and not breathing normally. The point of compression for all age groups is in the centre of the chest.

- A. True
- B. False

15. An unconscious patient who is not breathing normally is considered to be in cardiac arrest.

- A. False
- B. True

16. What is the correct CPR ratio and depth?

- A. 30 breaths to 2 compressions at approximately 1/3 of the depth of the chest
- B. 30 compressions at approximately 1/2 of the depth of the chest to 30 breaths
- C. 30 compressions at approximately 1/3 of the depth of the chest to 2 breaths

17. To open the airway of a child or adult, you must apply:

- A. Backward head tilt
- B. Chin lift
- C. A combination of backward head tilt and chin lift

18. When applying a defibrillator (AED), it is important that the electrodes (pads) are placed on the patient's chest according to the diagrams.

- A. True
- B. False
- C. Not important

19. A man is unconscious and is breathing? You position him:

- A. On his back
- B. On his side (recovery position)
- C. On his back with his legs raised
- D. On his back with his head turned to the side

20. When do I stop resuscitation?

- A. If the patient responds or begins breathing normally
- B. If ambulance or medical assistance arrives and takes over
- C. If you are physically or emotionally unable to continue
- D. Any of the above

21. The Australian Resuscitation Council (ARC) represents all major industry groups involved in the teaching and practice of resuscitation. ARC recommends that CPR be updated every:

- A. Every 5 years
- B. Every 12 months
- C. Every 3 years
- D. As required

22. For a conscious patient, consent should be obtained before providing first aid. For an unconscious patient, consent is deemed to have been implied.

- A. True
- B. False

Choking

23. A middle-aged man suddenly becomes distressed. He appears to be choking and points to his throat. He cannot speak and his face is turning blue. You should:

- A. Reassure him and offer him a glass of water
- B. Encourage him to cough to help dislodge the obstruction
- C. Begin CPR
- D. Lean him forward and give up to 5 back blows between the shoulder blades followed by 5 chest thrusts

24. For a person who is coughing and appears to be choking. You should:

- A. Encourage the patient to cough to help dislodge the obstruction
- B. Apply sharp back blows to help dislodge the obstruction
- C. Apply abdominal thrusts to help dislodge the obstruction

Bleeding / Wounds / Shock

25. What are some of the signs and symptoms of shock?

- A. Cold, pale sweaty skin. Rapid breathing
- B. Anxiety, restlessness, and confusion
- C. Drowsiness and possible unconsciousness
- D. All the above

26. What is the best position for a conscious patient suffering from shock?

- A. Sitting up
- B. In the recovery position
- C. Standing up
- D. In a position of comfort, ideally lying down.

27. What is the correct method when caring for an amputated body part?

- A. Place the amputated part directly in ice
- B. Place the amputated part directly in chilled water
- C. Wrap the amputated part in a piece of clean material and seal in a plastic bag then place the bag in cool water and add ice if possible.
- D. Place the amputated part in a refrigerator

28. If you are accidentally injured by a needle (needle stick injury). You need to:

- A. Wash the area thoroughly with soap and water (a mild antiseptic is also recommended)
- B. Apply a clean, preferably sterile adhesive dressing to the area
- C. Obtain advice from a doctor as soon as possible
- D. All the above

29. An employee is holding his arm and you notice a piece of metal embedded. You need to:

- A. Apply pressure bandage on the object
- B. Build up padding around the object
- C. Use tweezers to remove the object
- D. Flush the wound with water and bandage

Asthma

30. What are the main factors that cause the airways to narrow?

- A. The muscle around the airway tightens (bronchial constriction)
- B. The inside lining of the airways becomes swollen (inflammation)
- C. Extra mucus (sticky fluid) may be produced
- D. All the above

31. Ventolin is a reliever medication and is used in an asthma emergency because:

- A. It relaxes the smooth muscles around the airways
- B. It lowers the heart rate
- C. It is an effective pain reliever

32. A patient with asthma should be managed:

- A. Sitting upright, leaning forward to assist with breathing
- B. In the Recovery Position
- C. On their back

33. To correctly and effectively administer Asthma reliever medication, you:

- A. Give 2 separate puffs with 2 breaths per puff and wait 2 minutes
- B. Give 2 separate puffs with 4 breaths per puff and wait 4 minutes
- C. Give 4 separate puffs with 4 breaths per puff and wait 4 minutes
- D. Give 1 separate puff with 1 breath per puff and wait 4 minutes

Allergic Reaction

34. An allergic reaction develops into anaphylaxis when the:

- A. Respiratory system and / or cardiovascular system is involved
- B. Nervous system is involved
- C. Musculoskeletal system is involved

35. The first aid management of anaphylaxis includes:

- A. Calling for help / 000 and reassuring the patient
- B. Giving an adrenaline auto injector eg EpiPen or Anapen
- C. Being prepared to commence CPR if patient stops breathing
- D. All the above

36. Which of the following is associated with an Allergic / Anaphylactic reaction?

- A. Nausea / Vomiting
- B. Skin Redness / Itchiness
- C. Breathing difficulty / Chest tightness
- D. All the above

Stroke & Heart Conditions

37. A stroke occurs when the blood supply is disrupted to the:

- A. Heart
- B. Brain
- C. Lungs

38. F.A.S.T. is an easy way to remember the most common signs of stroke. FAST stands for:

- A. First Aid, Airway, Send for Help, Tongue
- B. Face, Arm, Speech, Time
- C. Faint, Allergy, Shock, Transient Ischaemic Attack

39. Signs and symptoms of a heart attack may include:

- A. Heavy pain in the chest / sometimes radiating
- B. Fatigue / Dizziness
- C. Nausea / Vomiting
- D. All the above

40. A man with a history of angina has chest pain. He has taken two doses of his medication however after 10 minutes of rest, the pain persists. What should you do?

- A. Closely monitor his progress
- B. Reassure the patient
- C. Call an ambulance
- D. All the above

41. To manage a suspected heart attack, the best position to have the patient is

- A. In the recovery position
- B. In a position of comfort, generally sitting upright, supported and leaning forward
- C. Walk around to help reduce the pain
- D. Lie on their back

Head, Neck & Spinal Injury

42. Which of the following are signs of a head injury?

- A. Loss of memory - particularly of the incident
- B. Blurred, double vision, headache
- C. Drowsiness, confusion, agitation, irritability, seizures
- D. All the above

43. The most important indicators of a head, neck or spinal injury is the history of the incident and mechanism of injury.

- A. True
- B. False

44. Care of the airway takes precedence over any other injury (including head, neck and spinal injury).

- A. True
- B. False

45. When the spinal cord is damaged, there may be:

- A. Loss of sensation or tingling and burning feelings. Loss of bladder or bowel control
- B. Floating sensations (described as if the patient has become detached from their body)
- C. Loss of control or weakness of the limbs. All movement may be absent. Difficulty breathing.
- D. All the above

46. Signs and symptoms of Concussion are:

- A. Brief loss of consciousness / dizziness / confusion /nausea / vomiting
- B. Blurred vision, short term memory loss, mild or generalised headache
- C. All the above
- D. None of the above

47. A seizure may follow a head injury.

- A. True
- B. False

48. Escape of blood or watery fluid from the ears, nose or mouth can indicate a head injury.

- A. True
- B. False

Poisoning

49. A poison may be injected, inhaled, ingested (through the mouth) or absorbed (through the skin)

- A. False
- B. True

50. When managing a person who has inhaled a poison. You should:

- A. Give water to help dilute the poison
- B. Carefully assess for dangers to ensure that you are not also affected and call 000
- C. Induce vomiting

Heat / Cold Injury

51. Heat Exhaustion and Dehydration is best managed by:

- A. Having the patient rest or lay down in a cool place
- B. Fan the patient to help stay cool
- C. Give sips of cool water if conscious and not feeling sick (should vomiting/nausea prevent rehydration and shock is noticeable, or if not improving Call 000)
- D. All the above

52. Hypothermia is best managed by:

- A. Gradual cooling to help lower body temperature
- B. Gradual warming to help elevate body temperature
- C. Direct heat (such as a heater / fireplace) to quickly increase body temperature
- D. Direct cooling to quickly reduce body temperature

Bites & Stings

53. A snake bite is best managed by:

- A. Ice / Cold compress
- B. Tourniquet
- C. Pressure Immobilisation
- D. Heat / Hot compress

54. A Red Back spider is best managed by:

- A. Ice/Cold compress
- B. Tourniquet
- C. Pressure Immobilisation
- D. Heat / Hot compress

55. A bee sting (not Anaphylactic in reaction) is best managed by:

- A. Ice / Cold compress
- B. Vinegar
- C. Pressure Immobilisation
- D. Heat / Hot compress

56. A bee may leave a visible barb at the wound site. You should:

- A. Leave it in place as it may inject more venom if you touch it
- B. Remove it by gently "flicking" or scraping it sideways
- C. Try to remove with a pair of tweezers

57. Common Jellyfish stings are best managed by:

- A. Carefully picking off any tentacles stuck to the skin
- B. Rinsing well with sea water
- C. Not applying vinegar or rubbing the stung area
- D. All the above

58. The role of vinegar on tropical jellyfish stings is:

- A. To inactivate the discharge of stinging capsules and to prevent further injection of venom
- B. To help calm and reassure the patient
- C. To relieve pain already present

Sprains, Strains & Dislocations

59. A dislocated finger should be:

- A. Quickly relocated back into place
- B. Supported, padded and RICER technique applied
- C. Pressure Immobilised

60. Sprains / Strains / Dislocations are best managed by:

- A. Application of the RICER technique
- B. Application of heat

61. Signs and symptoms of a fracture include:

- A. Intense pain at the injury site
- B. Deformity / Angulation. Loss of power, numbness, and tingling sensations.
- C. Tenderness, bruising, swelling, inflammation, discolouration over or around the affected area
- D. Any or all the above

62. If you are uncertain if the injury is a dislocation, manage as a fracture and gently immobilise in the position found.

- A. False
- B. True

Diabetes

63. A known diabetic patient is conscious but confused, lightheaded and dizzy. You should:

- A. Call Ambulance 000
- B. Give some diet soft drink provided the patient can swallow safely
- C. Give some high energy food (sugar/honey) provided the patient can swallow safely
- D. Give a dose of insulin to help balance sugar levels

64. Diabetic Hypoglycaemia or low blood sugar is often caused by:

- A. Overeating
- B. Administering too much sugar
- C. Drinking too much water
- D. Missing a meal or over exercising

65. Some of the signs and symptoms of Hyperglycaemia or high blood sugar are:

- A. Hot, dry skin
- B. Complaining of extreme thirst
- C. Fruity odour smell on their breath
- D. All the above

Epilepsy, Seizures & Convulsions

66. For an epileptic seizure, you should not:

- A. Call Ambulance 000
- B. Restrain the patient
- C. Place the patient into the Recovery Position
- D. Wait for at least 10 minutes as the seizure will eventually stop.

67. A child has a fever and convulsing. You should not:

- A. Over cool the child
- B. Put anything into their mouth
- C. Forcibly restrain the child
- D. All the above

68. If a person has a seizure your priority is to:

- A. Protect person from any danger
- B. Place person in the recovery position
- C. Time the seizure
- D. Call an Ambulance

69. A seizure may continue for several minutes. When it stops, you should:

- A. Sit the patient upright, leaning forward
- B. Keep the patient conscious to ensure the airway is open and clear
- C. Place the patient in the Recovery Position to ensure the airway is open and clear
- D. Help administer their medication

Eye & Ear and Nose Injuries

70. The best way to manage a blood nose is by:

- A. Sitting the person up with their head leaning backward and pinching the soft part of the nose for about 10 minutes and apply cold compress around the neck or forehead
- B. Sitting the person up with their head leaning forward pinching the soft part of the nose for about 10 minutes and apply cold compress around the neck or forehead
- C. Lying flat and pinching the soft part of the nose for about 10 minutes
- D. Place / pack tissues inside their nostrils to help stop the bleeding

71. A minor eye irritation can be managed by using a gentle stream of water to flush the object out:

- A. True
- B. False

72. If a child has an object firmly lodged in the ear, you may use a stream of water / liquid to help dislodge it:

- A. True
- B. False

Burns & Scalds

73. A worker has sustained a severe burn. You should FIRST:

- A. Apply ICE to help rapidly cool the area
- B. Cool the burn with water for at least 20 minutes
- C. Apply burn cream to help reduce the pain

74. What is the immediate management for a chemical burn to the eye?

- A. Open eyelids and flush with warm water for 20 minutes
- B. Keep eyelids closed and flush with warm water for 20 minutes
- C. Open eyelids and flush with cool running water for at least 20 minutes
- D. Open eyelids and flush with cool running water for 10 minutes

75. A patient has clothing stuck to her burnt skin. You should:

- A. Carefully pull it away from the burnt area
- B. Carefully cut around the stuck clothing

76. A hot water burn is managed immediately by:

- A. Immediately apply cool running water for at least 20 minutes
- B. Applying ice packs on the affected area
- C. Applying antiseptic cream on the affected area

77. Burns are classified as:

- A. Superficial (involve the top layer of skin – epidermis)
- B. Partial thickness (top and second layer of skin – epidermis and dermis)
- C. Full thickness (all skin tissues and deep underlying tissues are involved)
- D. All the above

Fractures

78. A closed fracture (no bone protruding) should be treated by:

- A. Applying ice to help reduce swelling and pain
- B. Support and immobilise in position found
- C. Elevate to help reduce internal bleeding
- D. Gently straighten to help realign the broken bone ends and to reduce pain

79. When managing an open fracture (bone is protruding), you first:

- A. Control bleeding
- B. Splint / Immobilise the injured limb
- C. Elevate the limb to reduce pain

80. A football player has sustained a possible fractured arm. You:

- A. Assist him into the position of most comfort – generally sitting with the arm gently supported and secured across the injured chest area.
- B. Ask him to move his arm to increase circulation to the injured area
- C. Straighten the injured arm to relief pain

Crush Injury

81. As a rule, crush syndrome injury is where:

- A. A major muscle mass is involved
- B. Prolonged period of compression may be as little as one hour but typically 4-6 hours
- C. Blood circulation to the affected area is compromised / restricted
- D. All the above

82. The crushing force should:

- A. Not be removed as sudden removal can cause further injury
- B. Be removed quickly if physically possible and safe to do so

Abdominal Injury

83. An abdominal trauma wound can lead to organs protruding. You should:

- A. Gently place them back into the abdomen
- B. Not touch them – wait for Ambulance
- C. Cover with a moist, preferably sterile non-stick type dressing or plastic wrap

84. For an unconscious patient with abdominal injuries. You should:

- A. Be prepared to commence CPR if patient stops breathing
- B. Ensure the patient is placed into the recovery position taking care to support the abdomen
- C. Monitor the patient for response, airway, normal breathing while waiting for Ambulance
- D. All the above

Drowning

85. You find a child face down in a backyard pool. You should:

- A. Remove child from the water – carry with head downwards to help drainage of fluid
- B. Be prepared to commence CPR if child stops breathing
- C. Place in recovery position in the event of regurgitation and vomiting
- D. All the above

86. Vomiting and regurgitation is common during resuscitation and after care management of a patient. This may be due to incorrect resuscitation technique or may be unavoidable

- A. True
- B. False

First Aid for children

87. If a child has sustained a head injury, seek medical assistance immediately if:

- A. The child becomes unconscious
- B. The child vomits several times
- C. The child is confused, drowsy and does not respond to your voice
- D. All the above

88. An infant has a severe airway obstruction (choking) – an ineffective cough. You should:

- A. Place the infants head down with the head / neck / shoulders supported on your hand
- B. If possible, hold the mouth open with your fingers.
- C. Give up to 5 back firm blows with the heel of your hand between the shoulder blades (checking after eachback blow) followed by 5 chest thrusts
- D. All the above

89. When applying resuscitation to an infant,

- A. Mouth and nose should be sealed
- B. Give two rescue breaths (gentle puffs)
- C. Ensure that the chest rises and falls after each puff
- D. All the above

90. If applying an AED to a child under 8 years of age, ensure that:

- A. The pads do not touch each other
- B. Paediatric pads are used if available (place on the front of chest / middle of back)
- C. The child is unconscious and not breathing normally
- D. All the above

91. Head tilt in an infant is not recommended because the trachea is softer, and airway is narrower than an adult. Head tilt may cause damage to the airway, distort the soft tissues of the neck and restrict breathing.

- A. True
- B. False

92. A young child has sand in his eye. You should:

- A. Gently rinse the eye preferably with sterile water
- B. Allow him to rub the eye to hopefully remove the sand
- C. Apply antiseptic to the affected area

93. Some common causes of Anaphylaxis are:

- A. Nuts, tree nuts, eggs, soy, sesame
- B. Milk, fish, shellfish, wheat
- C. Bees, wasps, ants
- D. All the above

94. Signs and symptoms of severe asthma include:

- A. Severe breathing difficulty and chest tightness
- B. Use of extra muscles to breathe, absent or increased wheezing
- C. Showing signs of shock
- D. All the above

95. Common triggers of Asthma are:

- A. Colds, flu, cigarette smoking
- B. Exercise / physical activity, allergic reaction to pollen / dust / insect stings
- C. Exposure to sudden changes in the weather (particularly cold and wet conditions)
- D. All the above

96. A child is having a febrile convulsion. You should:

- A. Place the child on a flat surface and protect from any danger or injury
- B. Not forcibly restrain the child or put anything in the child's mouth
- C. Remove any covering or clothes and ensure fresh air circulation
- D. All the above

97. A child has a bleeding nose. This is best managed by:

- A. Sitting up, leaning backward and pinching the soft part of the nose for about 10 minutes
- B. Sitting up, leaning forward pinching the soft part of the nose for about 10 minutes and apply cold compress around the neck or forehead
- C. Lying flat and pinching the soft part of the nose for about 10 minutes

98. Chest compressions on an infant are performed by applying:

- A. One hand over the lower half of the sternum
- B. Two fingers over the lower half of the sternum
- C. Two hands over the lower half of the sternum

99. Serious incidents involving children are to be documented and reported to:

- A. The Regulatory Authority
- B. The Supervisor/Principal
- C. Parents/Guardian
- D. All the above

100. The normal breathing rate per minute for an infant is:

- A. 16 – 20 breaths
- B. 20 – 25 breaths
- C. 25 – 40 breaths

Regulations covering first aid in an Education and Care setting

- 101. Under the Education and Care Services National Law, ACECQA has responsibility for determining the qualifications required to be held by educators working under the National Quality Framework, including first aid training. Regulation 136 of the Education and Care Services National Regulations outlines the first aid training requirements and renewals for educators under the National Quality Framework. These first aid requirements are for:**
- A. Emergency Asthma
 - B. Anaphylaxis Management
 - C. Provide First Aid and Cardiopulmonary Resuscitation (CPR)
 - D. All the above
- 102. The Education and Care Services National Regulations (no. 87) refers to: Incident, injury, trauma and illness records. An approved provider of an education and care service must ensure that immediate action will be taken in the case of any incident, injury, trauma, or illness, and accident or emergency treatment is initiated as well as accurate records completed and kept.**
- A. True
 - B. False
- 103. What would you do if a child in your care is injured?**
- A. Assess the situation for any further danger and clear other children away from the incident site
 - B. Provide first aid management within your skills and knowledge and refer to the child's medical management plan and risk minimisation plan
 - C. Wear gloves if possible and other PPE and practice hygiene procedures
 - D. Notify the Nominated Supervisor/ Responsible Person and parents/guardians, of the incident, illness, injury or trauma the same day that it occurs.
 - E. All the above
- 104. The incident, injury, trauma and illness record must include:**
- A. Name and age of the child
 - B. Circumstances leading to the incident, injury or trauma
 - C. Time and date the incident occurred, the injury was received, or the child was subjected to the trauma
 - D. All the above