

Questions Emergency Medicine Exam Tests

Questions tests topic 1.2, 1.3 and 1.4 (3 day)

1. Describe the lesion created by lewisite?
2. Describe the lesion created by carbon monoxide?
3. Describe the lesion created by phosgene?
4. Describe the lesion created by mustard gas?
5. Describe the lesion created by hydrocyanic acid?
6. What is the effect of phosgene?
7. What is the effect of mustard gas?
8. What is the effect of carbon monoxide?
9. What is the action of hydrocyanic acid?
10. Specify the main mechanism of the toxic effect of lewisite?
11. Specify the main mechanism of the toxic action of mustard gas?
12. Specify the main mechanism of the toxic effect of hydrocyanic acid?
13. Specify the main mechanism of the toxic effect of carbon monoxide?
14. Specify the main mechanism of the toxic effect of phosgene?
15. What is the smell of hydrocyanic acid?
16. What does phosgene smell like?
17. What is the smell of mustard gas?
18. What is the smell of lewisite?
19. What is the smell of carbon monoxide?
20. What is the physical state of carbon monoxide?
21. What is the physical state of mustard gas?

22. What is the state of aggregation of hydrocyanic acid?
23. What is the physical state of lewisite?
24. A pathological condition in which the extravasation of fluid is not balanced by its resorption and the vascular fluid pours into the alveoli - this is...?
25. Specify the phases of development of TOL when damaged by phosgene?
26. Anyone affected by phosgene is considered...?
27. What features do slow-acting pulmonary toxicants have?
28. What features do fast-acting pulmonary toxicants have?
29. What types of hypoxia determine the severity of the condition when affected by phosgene, the “gray” phase of hypoxia?
30. What types of hypoxia determine the severity of the condition when damaged by phosgene, the “blue” phase of hypoxia?
31. What types of hypoxia determine the severity of the condition when affected by hydrocyanic acid?
32. What types of hypoxia determine the severity of the condition in case of carbon monoxide injury?
33. What types of hypoxia determine the severity of the condition when affected by mustard gas?
34. What resorptive features do nitrogen oxides have?
35. What resorptive features does hydrogen sulfide have?
36. What resorptive properties does ammonia have?
37. What signs of phosgene damage indicate a latent period of TOL development?
38. What is the main drug for phosgene damage?
39. What clinical periods are not distinguished when affected by phosgene?
40. Specify the mode and features of oxygen therapy for carbon monoxide injury in the first hours after the injury?

41. Specify the mode and features of oxygen therapy for phosgene damage in the blue phase of hypoxia?
42. Specify the mode and features of oxygen therapy for phosgene damage in the gray phase of hypoxia?
43. Select complications of TOL?
44. What drugs are not used for TOL in the “gray” phase of hypoxia?
45. Doesn't it apply to the principles of TOL therapy?
46. What means are used to maintain the activity of the cardiovascular system during the period of TOL when damaged by phosgene in the stage of “blue” hypoxia?
47. What means are used to maintain the activity of the cardiovascular system during the period of TOL when damaged by phosgene in the stage of “gray” hypoxia?
48. Specify medications used to prevent complications in TOL?
49. Specify inhaled drugs used for the prevention and treatment of TOL?
50. Specify the clinical signs of the blue phase of TOL hypoxia?
51. What clinical sign is not typical for the gray phase of TOL hypoxia?
52. Which stage is not distinguished in the delayed form of development of hydrocyanic acid poisoning?
53. What clinical signs do not correspond to the clinical picture of cyanide damage?
54. What clinical signs do not correspond to the clinical picture of carbon monoxide damage?
55. Choose the correct statement about hydrocyanic acid?
56. What forms correspond to the fulminant variant of the clinical course of carbon monoxide damage?
57. What forms correspond to the delayed version of the clinical course of carbon monoxide damage?

58. List the immediate consequences of carbon monoxide damage?
59. What are the long-term consequences of carbon monoxide damage?
60. What antidotes are used to treat cyanide damage?
61. What antidote is used to treat carbon monoxide damage?
62. Specify the drugs used to quickly inactivate cyanogen ion circulating in the blood?
63. Specify the mechanism of action of acyzole?
64. Specify the mechanism of action of sodium thio-sulfate?
65. Specify the mechanism of action of anthicyanin?
66. Specify the mechanism of action of amyl nitrite?
67. Specify the correct expression about acyzole?
68. Which antidote is used by inhalation to provide first aid for damage caused by hydrocyanic acid?
69. Which antidote is not used to treat cyanide damage?
70. Specify the standard drug used to eliminate bradycardia in case of cyanide poisoning?
71. Specify the first aid measure that can be delayed in case of carbon monoxide damage?
72. Specify the first aid measure that can be delayed in case of damage to hydrocyanic acid?
73. In which organ is the greatest concentration of mustard gas created?
74. Select the correct statements about mustard gas?
75. What stages are characteristic of skin damage caused by mustard gas?
76. Indicate the name of the stage of skin damage due to mustard gas for mild damage?

77. Specify the name of the stage of skin damage due to mustard gas for moderate damage?
78. Specify the name of the stage of skin damage caused by mustard gas in case of severe damage?
79. Indicate the name of the stage of eye damage caused by mustard gas for mild damage
80. Indicate the name of the stage of eye damage caused by mustard gas for moderate damage
81. Indicate the name of the stage of eye damage caused by mustard gas in case of severe damage?
82. Specify the name of the stage of eye damage with lewisite for mild damage?
83. Specify the name of the stage of eye damage with lewisite for moderate damage?
84. Indicate the name of the stage of eye damage with Lewisite in case of severe damage?
85. Indicate the name of the stage of damage to the respiratory organs with mustard gas for mild damage
86. Indicate the name of the stage of damage to the respiratory organs with mustard gas for moderate damage
87. Indicate the name of the stage of damage to the respiratory organs due to mustard gas in case of severe damage?
88. Specify the name of the stage of damage to the respiratory organs by lewisite with mild damage?
89. Specify the name of the stage of damage to the respiratory organs by lewisite with moderate damage?
90. Specify the name of the stage of damage to the respiratory organs by lewisite with severe damage?
91. Indicate the name of the stage of damage to the gastrointestinal tract by mustard gas for mild damage

92. Indicate the name of the stage of damage to the gastrointestinal tract by mustard gas for moderate damage
93. Specify the name of the stage of damage to the gastrointestinal tract due to mustard gas in case of severe damage?
94. What antidote is used to help with lewisite infection?
95. What drug is used to reduce the resorptive effect of mustard gas
96. Specify the main type of hypoxia that occurs during percutaneous lesions of severe lewisite?
97. Specify the drug used for eye damage from mustard gas?
98. Specify the drug used for eye damage with lewisite?
99. Select the correct statements about lewisite?
100. What definitions correspond to generally poisonous agents?

Questions Tests for topics 1.1 and 1.5 (day 2)

1. Characterize the lesion created by CR?
2. What clinical symptoms do not correspond to the clinical picture of an irritant TCV injury?
3. Describe the lesion created by aarin?
4. Describe the lesion created by the indicated Bi-zet?
5. Characterize the lesion created by CS?
6. Find an irritating agent?
7. What is the effect of the substance DLK (LSD)?
8. What is the effect of the substance bi-zet (Bz)?
9. What antidote is used to help with irritant TCV damage?
10. What antidote is used to help with resorptive lesions of CR?
11. What antidote is used to help with resorptive lesions of CS?

12. Irritating agents are divided into...?
13. What is not the main way of pharmacological influence on the pathological process when affected by irritant agents?
14. What is the physical state of CS?
15. What is the physical state of CR?
16. What groups determine the resorptive effect of CS?
17. What is the smell of chloroacetophenone?
18. What is the smell of CS?
19. What data determine a mild degree of severity when affected by irritant agents?
20. What data determine the average severity of an irritating agent injury?
21. What data determine the severe degree of severity when affected by irritant agents?
22. What are the physicochemical properties of Vx?
23. What are the physicochemical properties of Vx?
24. What are the physicochemical properties of sarin?
25. What is the physical state of sarin?
26. What is the physical state of soman?
27. What is the cholinergic (synaptic) effect of FOS?
28. What is the non-cholinergic (intro-naptic) effect of FOS?
29. Specify the main type of hypoxia that occurs when FOS is damaged?
30. Aging of cholinesterase is...?
31. Specify the local symptoms of sarin damage with percutaneous damage?
32. What are the local symptoms of sarin exposure in case of oral exposure?

33. Specify the local symptoms of sarin damage during inhalation damage?
34. Specify the symptom(s) of nicotine-like effects of FOS?
35. Specify the symptom(s) of the muscarinic-like effect of FOS?
36. Specify the clinical manifestations of the effects of FOS on the central “M” and “N”-cholinergic synapses?
37. Specify the clinical manifestations of the effects of FOS on the central “M” and “N”-cholinergic synapses?
38. What symptoms determine the mild severity of sarin damage?
39. What symptoms determine the average severity of sarin damage?
40. What stages are distinguished in the clinic for severe forms of FOS lesions?
41. What emotions are primarily caused by the defeat of the DLK?
42. Specify the clinical manifestations of Bizet lesion?
43. Specify the clinical manifestations of damage to the DLK (LSD)?
44. Amnesia is characteristic of the lesion...?
45. What antidote is used for Bz lesions?
46. What antidote in a syringe tube is used to help with the defeat of FOS?
47. What antidotes are not used to help those affected by FOS?
48. Specify methods of detoxification for severe damage to FOS?
49. Specify the antidotes used for the defeat of FOS in a hospital setting?
50. Which group of drugs does dipyroxime belong to?
51. If FOS is affected, use a 15% solution of a cholinesterase reactivator. Name the drug?
52. If FOS is affected, use a 40% solution of a cholinesterase reactivator. Name the drug?

53. Specify the symptoms of transatropinization that are used when prescribing antidotes in the treatment of FOS?
54. Specify the mechanism of the antidote action of afin?
55. What is not the mechanism of action of anticholinergics when FOS is affected?
56. Specify a primary medical care measure for FOS lesions that can be delayed?
57. Specify the standard respiratory analeptic used for FOS lesions?
58. Specify the standard anticonvulsant for sarin damage?
59. Specify the standard means of relieving psychosis in case of Bz lesion?
60. What symptoms determine the severe degree of FOS damage?
61. What definitions correspond to agents with neurotoxic effects?
62. What definitions correspond to psychodysleptic agents?

Questions tests topic 1.7,1.8 (4 day)

1. What period of intoxication is not identified when affected by methanol?
2. Aren't... the most sensitive to methanol damage?
3. What is the main measure when providing first aid for methyl alcohol poisoning?
4. What antidote is used for damage caused by ethylene glycol?
5. What is the average severity of injury with methyl alcohol called?
6. What sign is characteristic of trichlorethylene damage?
7. Damage to internal organs due to methanol poisoning occurs...?
8. Where is dichloroethane primarily accumulated (deposited) in the body?
9. What processes are characteristic of the physical stage of the action of ionizing radiation on the body?
10. What is characteristic of the physicochemical stage of the action of ionizing radiation on the body?

11. What is characteristic of the biological stage of the action of ionizing radiation on an organism?
12. At what stage of the action of ionizing radiation does energy absorption occur by biomolecules and other components of the cell?
13. At what stage of the action of ionizing radiation do internal rearrangements occur in molecules due to energy migration?
14. At what stage of the action of ionizing radiation do reactions occur between free radicals and intact biomolecules?
15. At what stage of the action of ionizing radiation does damage develop at all levels of biological organization?
16. Changes that occur in biological systems under the influence of ionizing radiation are...?
17. What characteristics are typical for stochastic effects?
18. What characteristics are typical for non-stochastic effects?
19. What pathologies are related to stochastic effects?
20. What pathologies are related to non-stochastic effects?
21. Acute radiation sickness is...?
22. What periods are not distinguished in the bone marrow form of acute radiation sickness?
23. What syndromes are identified during the period of general primary reaction to irradiation of acute radiation sickness??
24. В патогенезе периода общей первичной реакции на облучение острая лучевая болезнь имеет значение?
25. The latent period for a mild form of acute radiation sickness is...?
26. Which system in the body is “critical” for a dose of more than 50 Gy?
27. Which system in the body is “critical” for 1-10 Gy?
28. Which system in the body is “critical” for 11-20 Gy?

29. Which system in the body is “critical” for 20-50 Gy?
30. Which blood cells will most accurately reflect the received dose on days 1-2 after irradiation?
31. Which blood cells will reflect the received dose with maximum accuracy on days 7-9 after irradiation?
32. For how long will leukocytes reflect the received dose with maximum accuracy...?
33. For how long will the lymphocytes reflect the dose received with maximum accuracy...?
34. On what day does the “primary devastation” phase begin in acute radiation sickness (write only the number)?
35. Features of acute radiation sickness from exposure to neutrons include?
36. The latent period between radiation exposure and the appearance of a neoplasm is, on average...?
37. The main reason for the reduction in average life expectancy after exposure to sublethal doses is considered...?
38. Where does strontium accumulate predominantly?
39. Where does cesium accumulate predominantly?
40. Where does iodine accumulate primarily?
41. Preventive means of protection against external radiation are divided into...?
42. What definition corresponds to drugs that increase the general nonspecific radioresistance of the body? (II-ionizing radiation)
43. What is the definition of radio protectors? (II - ionizing radiation)
44. A number showing how many times the dose of ionizing radiation is reduced when using a radioprotector is...?
45. What drugs are classified as radioprotectors?

46. What drugs are classified as drugs that increase the general nonspecific radioresistance of the body?
47. What drugs are classified as regeneration stimulants?
48. What drugs are used to prevent the primary reaction to radiation?
49. Specify the standard long-acting radioprotector?
50. What dose modification factors correspond to indralin?
51. What dose modification factors correspond to cystamine?
52. What dose change factors correspond to des?
53. What factors for changing the dose correspond to cystamine together with indralin?
54. Specify the dose interval at which it is advisable to use rapid-acting radioprotectors?
55. Specify the procedure for using cystamine?
56. Specify the procedure for using indralin?
57. Specify the procedure for using DES?
58. Specify the procedure for using the typhoid vaccine?
59. Specify what is not the mechanism of action of cystamine?
60. Specify the side effects of the DES radioprotector?
61. Indicate what is the mechanism of action of the radioprotectors listed below?
62. Indicate what is the mechanism of action of the radioprotectors listed below?
63. What means are not used to increase the body's nonspecific radioresistance?
64. Deoxynate is used during irradiation as...?
65. What does not apply to the means of early pathogenetic therapy of ARS?
66. What is not included in the groups of drugs for early pathogenetic therapy of ARS?

67. What is not used as methods and means of removing radioactive substances that have entered the internal environment of the body?
68. When inhaling radioactive substances, to reduce the intake of radionuclides into the body, is not carried out...?
69. What is not a means of preventing injuries from the intake of radioactive substances with food and water?
70. What is a means of preventing damage due to prolonged intake of radioactive substances with food and water?
71. What is a means of preventing damage due to prolonged intake of radioactive substances with food and water?
72. What is a means of preventing injuries when radioactive substances enter through a wound and burn surface?
73. What drugs are used for isotope dilution of iodine?
74. What drugs are used for isotopic dilution of strontium?
75. What drugs are used for isotope dilution of cesium?
76. Substances capable of forming stable complexes with radioactive substances that are easily excreted from the body...?
77. Complexing agents include...?

Questions Topic 2.1

In what year was the RSChS system created in our country?

What federal law defines the norms and rules for the protection of citizens of the Russian Federation in emergency situations?

The situation in a certain territory (water area) or an object that has developed as a result of an accident, disaster, natural hazard, natural or other event is called

A set of measures taken in advance and aimed at minimizing the risk of emergencies is called

A dangerous man-made incident that creates a threat to human life and health at an object, a certain territory, leading to the destruction of buildings, structures,

equipment, vehicles and disruption of the production or transport process, as well as causing damage to human health and (or) environment is called...

A sudden, fleeting event that entailed human casualties, damage to human health, destruction or destruction of objects and other material values, as well as causing serious damage to the environment is called

What emergencies are not present in terms of spreading speed?

What is the scale of the emergency?

Does not apply to medical consequences

They do not distinguish by severity

Damaging factors as a result of the direct action of excess pressure are called ...

Persons who have suffered material losses, moral damage during an emergency, as well as those who have mental and psychosomatic disorders of a non-psychotic nature are called

Management bodies, forces and means whose powers include the solution of issues of protecting the population and territories from emergencies are called

RSChS consists of....

What mode of operation of the RSChS is not distinguished?

The forces and means of the RSChS are divided into

A set of measures to prevent and eliminate the consequences of emergencies has stages

At what stage are the tasks of emergency protection of the population and reduction of the impact of damaging factors solved?

The state multidisciplinary head institution of the disaster medicine service of the Ministry of Health of the Russian Federation of a special type, which performs the functions of the governing body of the VSMC and the disaster medicine service of the Ministry of Health of Russia, is called

The main mobile medical and diagnostic formation of the VTsMK is called

Questions Topic 2.2

1. What is not included in the list of medical protection measures?
2. What way to protect the population is not?
3. Communicating to the population through the media about predicted and emerging emergencies, measures taken to ensure the safety of the population and territories, methods and methods of protection is called
4. What is OXION?
5. Where can I place the technical means of information OXION?
6. Where it is impossible to place the technical means of information OXION?
7. In accordance with federal legislation, the coverage areas of the local warning system are determined in areas where radiation hazardous facilities are located within a radius of km
8. In accordance with federal legislation, the coverage areas of the local warning system are determined in areas where chemically hazardous facilities are located within a radius of km
9. A set of measures for the organized removal (withdrawal) from large cities and other pre-designated settlements of workers and employees of economic facilities, transferring their activities to the suburban area or stopping it for wartime, the disabled and unemployed population from the zone of possible cataclysms is called
10. The organized removal of the disabled and not employed in the production of the population from areas contaminated with radioactive substances and dangerous for living, to safe places for permanent residence is called.....
11. Evacuation can be...
12. To determine the order of withdrawal (export) of the evacuated population and clear planning of its placement in the suburban area, the entire evacuation population is distributed into groups
13. Cystamine is
14. Medical means of anti-chemical protection that can neutralize the poison in the body by physical or chemical interaction with it or provide antagonism with the poison when acting on enzymes and receptors are called

15. KIMGZ - 147 is
16. IPP-8 is.....
17. Drugs that increase the body's defense against cold are called ...
18. Drugs that increase the body's defense against overheating are called ...
19. The organization of psychiatric care in emergencies includes stage
20. AI-4 is....

Questions Topic 2.3

1. Requirements specific to healthcare institutions and implemented in all projects are called.....
2. Drinking water supplies in medical institutions should be....
3. Supplies of technical water in medical institutions should be....
4. To organize and conduct these events, the hospital creates.....
5. The governing body for civil defense is called.....
6. The head of civil defense of the hospital is....
7. Which mode of operation of the hospital does not stand out?
8. What action is not taken in a hospital when there is a threat of an emergency?
9. A hospital of the third category is a hospital with regular bed capacity.... beds
10. A hospital with a bed capacity of 300-400 beds is classified as....
11. Which hospitals are not distinguished by purpose depending on the category?
12. When preparing a hospital for an emergency, it receives....
13. In case the hospital finds itself in the area of impact of the damaging factors of an emergency situation, the headquarters is developing.....
14. In case of an emergency, it is planned to place beds in medical departments from the norm..... per one bed

15. In preparation for the mass arrival of affected people, the hospital's emergency department is transferred to....

16. In preparation for the mass arrival of those affected, is deployed at the entrance to the hospital.

17. The evacuation of the hospital may be.....

18. When organizing the evacuation of a hospital, a working body is created....

19. When calculating the need for transport for the transportation of stretcher patients are considered conditionally recovered

20. When calculating the need for transport for transporting stretchered patients..... is considered non-transportable

Questions Topic 2.4

The totality of the actions of the disaster medicine service of the affected, the consistent and continuous provision of medical care to them in combination with evacuation is called....

The system of medical evacuation measures adopted in the civil defense of healthcare is based on the principle

The first stage of the system of medical evacuation measures is called

The second stage of the system of medical evacuation measures is called

What does not apply to the principles of the modern system of medical evacuation measures?

The unity of the principles of medical and evacuation measures and the presence of brief but clear documentation is called ...

The provision of medical care is carried out from simpler medical care to more complex is called

The forces and means of civil defense health care and disaster medicine services deployed on evacuation routes are called

The totality of evacuation routes, the stages of medical evacuation deployed on them and the ambulance vehicles used, was called

There is no branch in the concept of deployment of the medical evacuation stage.....

A certain list of therapeutic and preventive measures carried out in case of injuries and diseases in the form of self- and mutual assistance and personnel of the civil defense health care and disaster medicine service in the focus of the lesion and at the stages of medical evacuation is called

What form of medical care is not available?

Pre-hospital types of medical care include

Condition in which first aid is not provided

What refers to measures to maintain the patency of the respiratory tract?

Cutting off a non-viable limb hanging on a skin flap is an event

The distribution of the affected into groups on the basis of the need for homogeneous therapeutic and preventive measures, depending on medical indications and the established volume of medical care, is called

Medical triage of victims in emergency situations, performed outside the stage of medical evacuation - in the focus (or near) of an emergency, is carried out based on two leading signs:

As a result of sorting in the focus of mass sanitary losses,

For 1 hour of work, one sorting team can pass through itself a person.

Questions Topic 2.5

1. Substances used in industry and agriculture, used in everyday life, in the event of an emergency release (outflow), which can contaminate the environment in concentrations hazardous to the environment and living organisms are called...
2. Which substance is not released as quickly as it affects humans?
3. According to the hazard class, chemical substances are divided into....
4. First class includes
5. The dose that makes a person incapacitated is called.....
6. In case of accidents at chemically hazardous facilities, a person encounters....

7. During depressurization in a short period of time, the release from technological installations, containers for storing or transporting hazardous chemicals is called.....
8. Vapor clouds of chemical substances, when released into the atmosphere, form....
9. The territory within which the spread of hazardous chemicals occurred is called...
10. When making operational calculations, it is usually assumed that out of the total number of mildly affected people, it can amount to.....
11. In operational calculations, it is usually assumed that out of the total number of people affected, the mortality rate can be.....
12. What method of assessing the chemical situation is there?
13. What does not apply to chemical reconnaissance devices?
14. DDP-2 is.....
15. Antidote for carbon monoxide poisoning....
16. Antidote for poisoning with organophosphorus substances.....
17. Antidote for methyl alcohol poisoning.....
18. Antidote for poisoning with lewisite and arsenic.....
19. Antidote for poisoning with lewisite and potassium cyanide.....
20. Spontaneous decay of atoms is called.....
21. Substances in which the same number of protons, but different numbers of neutrons are called.....
22. Iodine 131 affects.....
23. Does not apply to corpuscular types of ionizing radiation....
24. Electromagnetic types of radiation include
25. What stage of the action of ionizing radiation on the body does not exist?

26. The indirect effect of ionizing radiation on the body is called.....
27. Which stage is not considered primary?
28. The quantitative characteristic of photon radiation, which is based on its ionizing effect in dry atmospheric air, is called.....
29. The amount of energy H transferred to a unit mass of a substance is called.....
30. The indicator used as a measure of the risk of long-term consequences of irradiation of the whole body and individual organs and tissues, taking into account their radiosensitivity, is called.....
31. The dose of external hard R radiation, which reflects the biological effect of radiation is called.....
32. According to the recommendation of the International Commission on Radiation Protection and WHO, the norm for natural background radiation is....
33. Irradiation with an effective dose of more than over the course of a year can be considered potentially dangerous.
34. Persons living near a source of ionizing radiation belong to the group...
35. The IAEA classifies an accident at a radiation facility with local consequences as....
36. In case of an accident at a radiation facility, ... is released. pollution zones
37. The threshold dose for the development of non-stochastic effects is considered to be.....
38. Single doses of ionizing radiation that do not lead to acute radiation injuries.....
39. What form of acute radiation sickness is not distinguished?
40. A set of organizational and technical measures to determine the degree of radioactive contamination of people and equipment is called.....
41. A set of organizational and technical measures to determine radiation doses to people is called.....

42. The average degree of intensity (tension) of the epizootic process is called.....
43. A wide spread of morbidity, both in level and in scope, covering a number of countries.....
44. What is the main mechanism of damage in a road traffic accident that is not identified?
45. An aviation accident that did not result in the death of crew members and passengers, but led to the complete destruction or severe damage of the aircraft is called.....
46. In car accidents, the ratio of the number of dead to injured is.....
47. When classifying flammable material by type, fire category D is a fire.....
48. With a building density of up to 20%, are most often found.
49. The first damaging factor in fires....
50. What concentration of CO in the air does a person feel?

Questions Topic 2.6

1. Which natural disasters are not highlighted?
2. The area of land from which waves emanate during an earthquake is called.....
3. The intensity of an earthquake is assessed by....
4. Earthquakes that are not felt or felt weakly are classified as
5. Identify.....degrees of damage to buildings
6. People get injured from improper behavior during an earthquake....
7. In case of an earthquake of 5-6 points, medical help can be sought....
8. Temporary significant flooding of an area with water as a result of a rise in its
9. Depending on the scale, they distinguish...
10. Which group of floods is not distinguished?

11. In case of catastrophic flooding,...
12. The storm severity scale includes...
13. A scale for assessing the strength of the storm has been proposed....
14. The cause of dust storms is....
15. Which storms are not distinguished?
16. A giant atmospheric vortex in which the pressure decreases towards the center, air currents circulate around the center counterclockwise or clockwise is called....
17. A temporary mud and mud-stone flow that suddenly forms in the beds of mountain rivers is called.....
18. The sliding displacement of rock masses down a slope under the influence of gravity is called....
19. Which drowning does not stand out?
20. Human survival rate in cold water at air temperature is.....

Questions Topic 2.7

1. He works at the distribution post....
2. The sorting team includes....
3. Everyone admitted to the hospital is assigned to....
4. Those affected with a questionable prognosis, having severe injuries, accompanied by increasing disorders of vital functions are classified as...
5. It is advisable to sort patients with traumatic brain injury into.....
6. Patients with open craniocerebral injuries, with closed depressed fractures of the skull bones without increasing compression of the brain are classified as...
7. When sorting, all victims with long-term compression syndrome (crash syndrome) are divided into....

8. Victims with moderate and severe degrees of long-term compression syndrome (crash syndrome), with signs of shock, acute cardiovascular failure, acute renal failure, but with preserved viability of the injured limbs are classified as.....

9. Victims with burns up to 40% of the body surface, with deep burns up to 30%, with burns of the upper respiratory tract are classified as...

10. A burn of the upper respiratory tract is equivalent to....

11. In case of poisoning in the hospital, the following measures are not taken....

12. In the event of a threat to the hospital during an accident at a radiation hazardous facility, staff and patients are given stable iodine at the rate of..

13. In the event of a threat to the hospital during an accident at a radiation hazardous facility, a paramedic wearing protective equipment and equipped with a device works at the distribution post...

14. In the event of a threat to the hospital due to an accident at a radiation hazardous facility, the admission department staff takes, in addition to stable iodine, a radioprotector....

15. The permissible level of contamination of victims' clothing and shoes is....

16. During medical triage of those affected by ionizing radiation,... is isolated.

17. What is not included in the second zone (clean) when there is a mass admission of infectious patients to the hospital?

18. What is included in the first zone (infected) when there is a mass admission of infectious patients to the hospital?

19. When victims are admitted to the hospital from the source of a radiation accident, the hospital staff must take cystamine

20. In case of poisoning with organophosphorus pesticides, in the first stage, are administered. atropine

