

The S.T.A.B.L.E. Program

6th Edition Pre-Test Answer Sheet

Name (required): _____

Date: _____ Course Location: _____

I am a (circle one): MD DO RN NNP PNP CNS RT LPN Nursing Assistant
Corpsman Other: _____

I work most of the time in the: Well Baby Nursery NICU Labor/ Delivery Postpartum
Emergency department Other: _____

Each question is worth 2.5 points. Please mark only one answer for each question. If you change an answer, please cross out your first answer and initial it.

- | | | |
|-----------|-----------|-----------|
| 1) a b c | 15) a b c | 29) a b c |
| 2) a b c | 16) a b c | 30) a b c |
| 3) a b c | 17) a b c | 31) a b c |
| 4) a b c | 18) a b c | 32) a b c |
| 5) a b c | 19) a b c | 33) a b c |
| 6) a b c | 20) a b c | 34) a b c |
| 7) a b c | 21) a b c | 35) a b c |
| 8) a b c | 22) a b c | 36) a b c |
| 9) a b c | 23) a b c | 37) a b c |
| 10) a b c | 24) a b c | 38) a b c |
| 11) a b c | 25) a b c | 39) a b c |
| 12) a b c | 26) a b c | 40) a b c |
| 13) a b c | 27) a b c | |
| 14) a b c | 28) a b c | |