Part I: Knowledge Questions

Questions 1-13 are knowledge-based questions. Please answer these to the best of your ability. Individual responses will be kept anonymous, while aggregate responses will help the Department of Health and the University of Hawaii to identify areas that should be addressed in our targeted health professions bioterrorism preparedness training. Please circle the one best answer for the following questions.

1. Which of the following diseases have potential for person-to-person spread?
   A. Anthrax and plague
   B. Plague and botulism
   C. Botulism and brucellosis
   D. Smallpox and plague

   **ANSWER is D.**

   **References:**


2. Which of the following are good biological terrorism threats because of substantial morbidity and mortality, ease of production, efficient dissemination, stability in aerosol, or high infectivity?
   A. Anthrax, chickenpox, botulism, and plague
   B. Anthrax, smallpox, chickenpox, and plague
   C. Anthrax, smallpox, botulism, and plague
   D. Anthrax, smallpox, mumps, and plague

   **ANSWER is C.**

   **References:**

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3. The deadliest form of anthrax is:
   A. Cutaneous
   B. Inhalational
   C. Gastrointestinal
   D. Bubonic

**ANSWER is B.** References:


4. Which of the following symptoms is/are not commonly found in inhalation anthrax and if present could help to differentiate an upper respiratory tract infection from anthrax?
   A. Rhinorrhea and sore throat
   B. Dyspnea
   C. Meningeal signs
   D. Vomiting

**ANSWER is A.** References:


5. A pathognomonic chest X-ray finding of advanced inhalation anthrax is:
   A. Cavitation
   B. Widened mediastinum
   C. Normal chest X-ray despite dyspnea and tachypnea

**ANSWER is B.** References:

6. Smallpox has all of the following clinical features EXCEPT:

A. The incubation period ranges from 7-17 days.
B. During the incubation period, the infected person looks and feels healthy and cannot infect others.
C. Infectivity is highest after the fever has begun and during the first 7-10 days following the appearance of the rash.
D. The virus can only be spread through direct or indirect contact with open lesions (e.g., by touching an infected lesion or by contact with infected clothing or bedding).

ANSWER is D. References:


7. Which of the following features help to distinguish the rash of smallpox from that of chickenpox:

A. The initial smallpox lesions coincide with the onset of fever while the fever in chickenpox precedes the rash by 2-3 days.
B. The smallpox rash is centrifugal (majority of lesions on the face and extremities) while the rash in chickenpox is central (majority of lesions on the trunk).
C. Various stages of lesion progression can be found at any one single location on a smallpox patient while the lesions of chickenpox tend to be all at the same stage of development.
D. Lesions rarely occur on the palms and soles in smallpox, while lesions commonly occur on the palms and soles in chickenpox.

ANSWER is B. References:

8. What infection control measures are recommended for a person with suspected or confirmed smallpox?
   A. Isolation of the person in a negative-air pressure room
   B. Protective clothing for health-care workers in contact with that patient
   C. Vaccination of persons involved with direct medical care of suspected cases
   D. Monitoring contacts of suspected smallpox cases for febrile illness
   E. All of the above infection control measures are recommended for a person with suspected or confirmed smallpox

   ANSWER is E. References:


9. What is a critical measure in preventing contact transmission of vaccinia virus (the agent used in the currently licensed smallpox vaccine)?
   A. Thorough hand washing after contact with the vaccination site
   B. Isolation of the vaccinated person
   C. Use of a porous bandage to cover the vaccination site
   D. Antibacterial ointment applied to the vaccination site
   E. Application of the vaccine at an anatomic site normally covered by clothing

   ANSWER is A. References:


10. Epidemiologic features of a plague outbreak that may indicate an intentional release of the plague organism include:
    A. Occurrence in persons with known health risks such as chronic pulmonary disease
    B. Occurrence in areas with prior reported rodent deaths
    C. Location of infections outside areas of known enzootic infection

    ANSWER is C. References:

11. The most common early presenting syndrome associated with the majority of high risk (“Category A”) bioterrorism-associated diseases (i.e., anthrax, botulism, plague, smallpox, tularemia, and viral hemorrhagic fevers) is:

A. Acute bloody diarrhea
B. Influenza-like illness
C. Acute hepatitis
D. Fever and rash

**ANSWER is B.** References:


12. Persistence of spores in the environment is of concern after a bioterrorism event involving:

A. Anthrax
B. Tularemia
C. Plague
D. All of the above

**ANSWER is A.** References:


13. According to Hawaii State Law, a physician who sees a patient he or she suspects of having anthrax or smallpox must notify the State Department of Health:

A. By phone as soon as the suspected diagnosis has been laboratory confirmed
B. By phone as soon as the provisional diagnosis is established
C. By mail, phone, or fax within 72 hours
D. Immediately after receiving written permission from the patient (or his/her legal guardian)

**ANSWER is B.** Reference:

Hawaii Administrative Rules, Title 11, Chapter 156, relating to communicable and dangerous diseases. See URL: [http://www.hawaii.gov/health/about/rules/11-156.pdf](http://www.hawaii.gov/health/about/rules/11-156.pdf)