

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

Pre-Assessment Answer Sheet

Name (required): _____

Date: _____ Course location: _____

I am a (circle one): MD DO RN NNP CNS LPN RT 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.

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|-----|---|---|---|-----|---|---|---|-----|---|---|---|
| 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 | | | | |