


TOP Reliable EMT Test Braindumps - NREMT Emergency Medical Technicians Exam - The Best New EMT Test Format

EMT Exam Overview	
General Information	
<ul style="list-style-type: none">• Cognitive Exam<ul style="list-style-type: none">◦ 70-120 Questions◦ 2 Hours	<ul style="list-style-type: none">• Psychomotor Exam<ul style="list-style-type: none">◦ Hands-On Testing◦ Varies by State
Cognitive Exam Breakdown	
<ul style="list-style-type: none">• Airway, Respiration, and Ventilation (18-22%)• Cardiology and Resuscitation (20-24%)• Trauma (14-18%)• Obstetrics and Gynecology (27-31%)• EMS Operations (10-14%)	
	
<div style="border: 1px solid red; padding: 5px; display: inline-block;">The cognitive exam is computer adaptive (CAT).</div>	

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Test Prep EMT Exam Introduction

The National Register Emergency Medical Technician (EMT) cognitive test is a computer adaptive test (CAT). This means that each candidate is evaluated based on the position of the responses on a spectrum. Once a candidate gets the correct answers, the computer will automatically enter more difficult questions to continue testing the candidate's skill level. The number of items a candidate can expect from the EMT exam will be between 70 and 120. Each exam will have between 60 and 110 "live" elements that will be counted towards the final score. The exam will also include 10 pilot questions that do not affect the final score. The maximum time allowed to complete the exam is 2 hours. To pass the exam, candidates must meet a standard skill level. The standard of success is defined by the ability to provide safe and effective entry-level emergency medical care.

There are some steps to apply for Test Prep EMT Exam

Step 1: Visit to EMT Exam Registration
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Step 3: Search for EMT Certifications Exam
Step 4: Select Date and Center of examination and confirm with payment value of \$80

NREMT Emergency Medical Technicians Exam Sample Questions (Q87-Q92):

NEW QUESTION # 87

A 32-year-old female has a history of dysmenorrhea, abdominopelvic pain, and pain when having a bowel movement. She has not been sexually active in 8 months. Her symptoms are most likely caused by

- A. Premature menopause
- B. An infection that is either bacteria or a virus
- C. Spontaneous abortion
- D. Endometrial tissue growing outside the uterus

Answer: D

Explanation:

These symptoms are classic for endometriosis, where endometrial tissue grows outside the uterus. Symptoms often include:

- * Pelvic pain
- * Painful menstruation (dysmenorrhea)
- * Painful bowel movements or intercourse

Spontaneous abortion does not apply here due to lack of pregnancy. Premature menopause is rare at this age and presents differently. Infection is less likely in the absence of recent sexual activity or fever.

References:

NREMT Medical - Gynecologic Emergencies
ACOG Guidelines on Endometriosis
National EMS Education Standards - OB/GYN Emergencies

NEW QUESTION # 88

Which of the following techniques are appropriate for examining a patient with an acute abdomen?

Select the two correct options.

- A. Lie the patient supine with legs flexed
- B. Press softly if the abdomen has a pulsating mass
- C. Visualize the abdomen before palpation
- D. Begin palpation with the most painful quadrant
- E. Palpate the abdomen prior to auscultation

Answer: A,C

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

In patients with acute abdominal pain, you must first inspect (visualize) for distension, discoloration, or masses before touching. Palpation always begins away from the most painful area. The patient should be in a supine position with knees flexed to relax the abdominal muscles and ease the exam.

Palpating a pulsating mass could rupture an abdominal aortic aneurysm and is contraindicated.

References:

NREMT Cognitive Exam Blueprint - Medical Emergencies
Emergency Care and Transportation of the Sick and Injured (AAOS, 11th ed.) - Chapter: Abdominal and GI Emergencies EMT-B
National Standard Curriculum, Module: Medical Emergencies

NEW QUESTION # 89

A 13-year-old patient is lethargic with a fever, headache, and a stiff neck. Which of the following statements should the EMT consider while caring for this patient? Select the two answer options that are correct.

- A. Airway management is a concern for this patient.
- B. The patient is likely contagious to others.
- C. EMTs cannot treat the patient without a parent's consent.
- D. The patient must get fully decontaminated prior to treatment.
- E. The patient requires minimal stimuli to prevent vomiting.

Answer: A,B

Explanation:

The correct answers are A. The patient is likely contagious to others and B. Airway management is a concern for this patient.

Key Diagnosis: Suspected Meningitis

The patient presents with:

Fever

Headache

Stiff neck

Lethargy

These are classic signs of meningitis, a serious infection of the central nervous system.

Why A is correct (Contagious):

Certain forms of meningitis (especially bacterial meningitis) are highly contagious Spread via respiratory droplets NREMT-aligned guidance states:

"Patients with suspected meningitis should be considered contagious."

"Use appropriate PPE and precautions."

Why B is correct (Airway concern):

Decreased level of consciousness (lethargy) increases risk of:

Airway compromise

Vomiting and aspiration

Continuous airway monitoring is critical

"Altered mental status requires close airway monitoring."

Why the other options are incorrect:

C). Minimal stimuli to prevent vomiting# More associated with head injury or increased ICP, not primary meningitis management D).

Cannot treat without parent consent# In emergencies, implied consent applies, especially in minors E). Full decontamination required# Not indicated - meningitis is not a hazardous materials exposure Exact Extracts (NREMT-aligned EMT educational references):

"Meningitis may present with fever, headache, stiff neck, and altered mental status."

"Consider patients contagious and use PPE."

"Airway management is a priority in patients with decreased LOC."

Clinical Priority Summary:

Suspected meningitis requires infection control precautions and airway vigilance, making A and B the correct answers.

References:

NREMT EMT Education Standards - Medical Emergencies (Neurological/Infectious) NREMT National Continued Competency Program (NCCP) AAOS Emergency Care and Transportation of the Sick and Injured (NREMT-aligned)

NEW QUESTION # 90

The key to effectively managing a multiple casualty incident is to

- A. initiate START triage procedures immediately.
- **B. utilize the incident command structure.**
- C. request additional resources as early as possible.
- D. defer resource decisions to the first arriving chief officer.

Answer: B

Explanation:

The correct answer is D. utilize the incident command structure.

Key Concept: Incident Command System (ICS)

The most important principle in managing a multiple casualty incident (MCI) is the use of a structured command system. The Incident Command System (ICS) provides:

Organization

Clear leadership

Efficient communication

Resource management

Why D is correct:

ICS ensures that:

Roles are clearly defined (triage, treatment, transport, staging, etc.) Resources are used efficiently Scene operations are coordinated and controlled NREMT-aligned guidance states:

"The Incident Command System is essential for managing mass casualty incidents."

"ICS provides organization and structure to chaotic scenes."

Why the other options are incorrect:

A). Defer decisions to chief officer# ICS begins with first arriving unit, not delayed leadership B). Request additional resources early# Important, but not the key foundational principle C). Initiate START triage immediately# Important step, but only one component of overall management Exact Extracts (NREMT-aligned EMT educational references):

"Use of the Incident Command System is critical in MCI management."

"ICS ensures coordinated response and resource allocation."

"All operations should function within the ICS framework."

Clinical Priority Summary:

The foundation of effective MCI management is organization through ICS, making D the correct answer.

References:

NREMT EMT Education Standards - EMS Operations (Incident Command System) NREMT National Continued Competency Program (NCCP) FEMA ICS Guidelines (aligned with NREMT)

NEW QUESTION # 91

An EMT is using a BVM to ventilate a 28-year-old patient with asthma. The patient is unresponsive, and their vital signs are BP 70/40, P 142, R 8, and SpO₂ 89% on room air. The patient is becoming increasingly difficult to ventilate. What should the EMT do next?

- A. Apply high-flow oxygen via non-rebreather mask
- **B. Decrease the rate of ventilations**
- C. Place the patient on CPAP
- D. Ventilating the patient more forcefully

Answer: B

Explanation:

In patients with asthma experiencing respiratory failure, improper ventilation (especially excessive rates) can lead to air trapping and increased intrathoracic pressure, reducing venous return and worsening hypotension.

The correct technique is to ventilate slowly to allow full exhalation - around 1 breath every 5-6 seconds for adults.

CPAP is contraindicated in unresponsive patients who cannot maintain their own airway. A non-rebreather mask would be insufficient for an unresponsive patient, and forceful ventilation risks barotrauma.

References:

NREMT EMT Psychomotor Exam Guide: Airway, Respiration and Ventilation

American Heart Association (AHA) BLS Provider Manual (2020)

National EMS Education Standards (2011) - Airway Management Section

NEW QUESTION # 92

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