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NREMT Emergency Medical Technicians Exam Sample Questions (Q80-Q85):

NEW QUESTION # 80
A 55-year-old patient has ROSC and is trying to push the BVM away. Which of the following actions should the EMT take next?

- A. Restrain the patient and continue ventilation.
- B. Switch to supplemental oxygen and check for a pulse.
- C. Switch to supplemental oxygen and remove the AED.
- D. Restrain the patient and remove the AED.

Answer: B

Explanation:
Return of spontaneous circulation (ROSC) indicates that the patient has regained a perfusing rhythm. If the patient is pushing away the BVM, this suggests improving mental status and spontaneous respirations.
Option D is correct because NREMT post-resuscitation care requires EMTs to reassess airway, breathing, and circulation, including confirming a pulse, and transition from assisted ventilations to supplemental oxygen if the patient is breathing adequately.
Options A and B are inappropriate because restraining a post-ROSC patient is rarely indicated and may worsen agitation.
Option C omits reassessment of circulation, which is critical after ROSC.
NREMT stresses frequent reassessment and supportive care following successful resuscitation.

NEW QUESTION # 81
A 30-year-old patient has a gunshot wound to the chest and is unconscious. The skin is pale and cool, and capillary refill is 2 seconds. Lung sounds are absent on the right side. The vital signs are BP 100/50, P 140, R
18 and shallow, and SpO# 88% on room air.
Which of the following signs or symptoms are the strongest indicators of hypovolemic shock? Select the three answer options that are correct.

- A. Lung sounds
- B. Heart rate
- C. Mental status

Answer: A,B,C

Explanation:
Hypovolemic shock results from acute blood loss, commonly seen with penetrating trauma such as gunshot wounds. NREMT identifies several key indicators that reflect reduced circulating volume and inadequate tissue perfusion.
Option A (Heart rate) is a strong indicator. Tachycardia (P 140) reflects the body's attempt to compensate for reduced blood volume and maintain cardiac output.
Option B (Lung sounds) are significant in this case because absent sounds suggest associated chest trauma that may contribute to blood loss and impaired oxygenation, worsening shock.
Option C (Mental status) is a critical indicator. Unconsciousness reflects inadequate cerebral perfusion, a late and serious sign of shock.
Additional supportive findings include pale, cool skin and borderline hypotension. NREMT emphasizes early recognition of shock and rapid control of bleeding, oxygenation, and transport to definitive care.

NEW QUESTION # 82
A 27-year-old patient is under arrest and in handcuffs after an altercation with police. The patient has a swollen left wrist that is tender to the touch. There is no deformity to the wrist, and distal pulses are present.
The EMT is considering the following transport options:
* Option 1: Transport the patient in the ambulance, handcuffed, with the key-holding officer following the ambulance in a police car.
* Option 2: Transport the patient in the ambulance, but exchange the handcuffs for locking leather restraints to which the EMT has a

key.
Which of these options should the EMT choose, if either?

- A. Either option
- B. Neither option
- C. Option 1 only
- D. Option 2 only

Answer: D

Explanation:
NREMT guidelines emphasize that EMTs must be able to rapidly release any restraints applied to a patient in the event of airway compromise, vomiting, cardiac arrest, or sudden deterioration.
Option B is correct because exchanging handcuffs for EMS-controlled restraints ensures patient safety while maintaining custody. The EMT having the key allows immediate access if emergency care is required.
Option A is unsafe because the EMT does not have control over the restraints, potentially delaying lifesaving interventions.
Option C is incorrect because patient safety standards must always be met.
Option D is incorrect because transport is necessary for evaluation and care.
NREMT stresses that custody never supersedes patient safety, and EMS must maintain control of patient restraints during transport.

NEW QUESTION # 83
A 19-year-old patient has received multiple stab wounds. The patient is unresponsive. The vital signs are BP 82/60, P 116, R 28, and SpO2 86%. Which substance would the EMT expect to increase in the patient's body?

- A. Sodium bicarbonate
- B. Carbon dioxide
- C. Lactic acid
- D. Water

Answer: C

Explanation:
Comprehensive and Detailed Explanation From Exact Extract:
The patient is in hypoperfusion (shock) from blood loss. In shock states, tissues are deprived of oxygen, leading to anaerobic metabolism, which produces lactic acid as a byproduct. This causes metabolic acidosis, which is a critical sign of systemic oxygen debt.
Carbon dioxide rises with respiratory failure, but lactic acid is a more specific indicator of cellular hypoxia.
References:
NREMT Medical Emergencies: Shock
Brady Emergency Care, Chapter: Shock and Resuscitation
Advanced EMT Curriculum - Pathophysiology of Shock

NEW QUESTION # 84
An unresponsive 79-year-old female has agonal respirations. You should

- A. Open her airway and suction until clear
- B. Check for a pulse
- C. Open her airway and ventilate her with a BVM
- D. Begin chest compressions

Answer: B

Explanation:
Comprehensive and Detailed Explanation From Exact Extract:
Agonal respirations arenot effective breathingand can mimic gasping or snorting. They often occur in cardiac arrest. However, before initiating chest compressions, the EMT mustconfirm pulselessnessby checking acarotid pulse for no more than 10 seconds(AHA 2020 BLS Guidelines).
Only after pulse confirmation (or absence) should compressions begin. Suctioning or ventilating is premature unless a pulse is found.
References:

AHA BLS Provider Manual (2020) - Adult Basic Life Support Algorithm
NREMT Cardiac Arrest Management - Adult Assessment Flow
AAOS EMT Textbook - Chapter: Cardiac Arrest and Resuscitation

NEW QUESTION # 85

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