

# New EMT Exam Question - EMT Hot Spot Questions

Emergency Medical Technician (EMT) Exam Outline		
Content Categories	Percentage of Examination	Adult/Pediatric Contents
1. Airway Respiration and Ventilation	18%-22%	85%/15%
2. Cardiology and Resuscitation	22%-26%	85%/15%
3. Trauma	13%-17%	85%/15%
4. Medical; Obstetrics and Gynecology	25%-29%	85%/15%
5. EMS Operations	10%-14%	N/A

**Time limit:** 120 minutes

**Total questions:** 70-120

**Question Format:** Multiple-choice

**Exam Delivery:** Computer-adaptive (CAT)

**Mometrix TEST PREPARATION**

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## NREMT Emergency Medical Technicians Exam Sample Questions (Q11-Q16):

### NEW QUESTION # 11

Defusing sessions should do which of the following in order to be successful? Select the two correct options.

- A. Force all providers to provide feedback
- B. Have mental health experts present during the session
- C. **Allow the open sharing of information**
- D. **Be held immediately following an incident**
- E. Take place 72 hours or more following an incident

**Answer: C,D**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Defusing is an informal, short-term intervention after a critical incident. It should:

- \* Occur within hours of the event (ideally the same shift)
- \* Encourage voluntary open discussion in a confidential setting

It is not a full debrief or counseling session and doesn't require mental health professionals present. Forcing participation or waiting too long (e.g., 72+ hours) can reduce its effectiveness.

References:

NREMT EMS Operations - Critical Incident Stress Management (CISM)

International Critical Incident Stress Foundation (ICISF) Guidelines

National EMS Education Standards - Mental Health and Stress Response

### NEW QUESTION # 12

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

**Answer: B**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

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 # 13

A 12-year-old male suffered helmet-to-helmet contact while playing football. A bystander states, "He passed out for several seconds, then walked off the field under his own power." He is now unresponsive, and his vital signs are BP 180/110, P 90, and R 6. You should suspect

- A. Intracerebral hematoma
- B. **Epidural hematoma**

- C. Subarachnoid hemorrhage
- D. Subdural hemorrhage

**Answer: B**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

An epidural hematoma classically presents with a "lucid interval" - a brief period of regained consciousness following head trauma, followed by rapid deterioration. This is due to arterial bleeding, often from the middle meningeal artery, leading to increasing intracranial pressure.

Signs include:

- \* High blood pressure
- \* Decreasing respiratory rate
- \* Altered LOC or unresponsiveness

Subdural hemorrhages are slower venous bleeds, common in elderly patients. Subarachnoid hemorrhage often presents with "worst headache of life." Intracerebral bleeds are less commonly linked to lucid intervals.

References:

NREMT Trauma Module - Head Injuries

AAOS Emergency Care Textbook (11th ed.), Chapter: Head and Spine Trauma Emergency Neurological Life Support (ENLS) Guidelines - Traumatic Brain Injury

**NEW QUESTION # 14**

Heat exhaustion is most frequently associated with

- A. Hypertension
- B. Hypovolemia
- C. Bradycardia
- D. Altered mental status

**Answer: B**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Heat exhaustion results from prolonged exposure to elevated temperatures, leading to fluid and electrolyte loss (especially sodium and water), causing hypovolemia. This can result in:

- \* Tachycardia
- \* Weakness
- \* Dizziness
- \* Profuse sweating

Unlike heat stroke, mental status is typically preserved in heat exhaustion. Hypertension and bradycardia are not characteristic.

References:

NREMT Environmental Emergencies Module

National EMS Education Standards - Heat-Related Illnesses

AAOS Emergency Care (11th ed.), Chapter: Environmental Emergencies

**NEW QUESTION # 15**

A 38-year-old patient is unconscious with slow, shallow, and gasping breaths. The patient is not moving.

What should the EMT perform first?

- A. Auscultate breath sounds
- B. Perform a secondary assessment
- C. Check a carotid pulse
- D. Assess the airway

**Answer: D**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

In any unresponsive patient, the first step is to assess and open the airway to determine patency and identify obstruction or inadequate

breathing.

Gasping respirations (agonal) are not effective; they require BVM ventilation support. The airway must be open before checking for a pulse or performing auscultation. A secondary assessment is performed only after primary survey and stabilization.

## References:

AHA BLS Provider Manual (2020) - Unresponsive Patient Algorithm

NREMT Airway Skills - Primary Assessment

## National EMS Education Standards - Airway, Breathing, Circulation (ABC) Sequence

## NEW QUESTION # 16

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