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How can you ready for Emergency Medical Technicians (EMT) Exam

For Emergency Medical Technicians (EMT) Exam, there is a study guide

Emergency Medical Technicians (EMT): Get our quick guide if you don't have time to read all the page.

The National Registry of Emergency Medical Technicians, or NREMT, is a nonprofit organization that helps maintain the skills, knowledge, and abilities of Emergency Medical Technicians (EMTs) in the United States. Although you probably know the important role EMUs play in our society, you may not be familiar with the proof required to become an emergency medical technician. NREMT manages a wide range of professional emergency medical tests, including First Aid, First Aid (EMR), First Aid Technicians (EMT), Advanced First Aid Technicians (AEMT), EMT -Intermediate / 99 (EMT- I / 99) and paramedics. Although the exams vary by type of emergency responder, they cover all the general knowledge and skills necessary to provide emergency medical services. In this guide, we'll cover everything you need to know about the EMT exam, including study tips, test content, scoring, the best NREMT practice exam, and much more.

NREMT Emergency Medical Technicians Exam Sample Questions (Q14-Q19):

NEW QUESTION # 14

The key to effectively managing a multiple casualty incident is to

- A. Defer resource decisions to the first arriving chief officer.
- **B. Utilize the incident command structure.**
- C. Initiate START triage procedures immediately.
- D. Request additional resources as early as possible.

Answer: B

Explanation:

The foundation of effective multiple-casualty incident (MCI) management is the Incident Command System (ICS). NREMT teaches that ICS provides clear leadership, communication, accountability, and coordination of resources.

Option D is correct because ICS allows for scalable management, efficient delegation, and integration of multiple agencies.

Option B is important but is a component of ICS, not the core principle.

Option C is a tactical step that occurs within the command structure.

Option A misunderstands ICS, as command is established based on arrival, not rank alone.

NREMT stresses that without ICS, MCIs become chaotic and unsafe, regardless of clinical skill.

NEW QUESTION # 15

A 26-year-old patient has an altered mental status. Family advises that the patient has diabetes. The patient's skin is pale, cool, and clammy. What, if anything, can the EMT infer about the patient's glucose level based on the patient's presentation?

- **A. The patient's blood sugar is most likely low.**
- B. The patient's blood sugar is most likely high.
- C. The patient's blood sugar cannot be inferred.
- D. The patient's blood sugar is most likely normal.

Answer: A

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Altered mental status, combined with pale, cool, and clammy skin, is strongly suggestive of hypoglycemia (low blood sugar).

Hypoglycemia is especially dangerous in diabetics who take insulin or oral hypoglycemics.

The body's adrenergic response causes the "cool and clammy" presentation.

Hyperglycemia typically presents with warm, dry skin and develops more slowly. EMTs should administer oral glucose if the patient can swallow.

References:

NREMT Medical Guidelines - Endocrine Emergencies

NEW QUESTION # 16

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 SpO₂ 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. Mental status
- B. Heart rate
- C. Lung sounds

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 # 17

You are called to a small hotel where it is reported by the manager that several persons, in separate rooms, are unresponsive. Your first actions should be to

- A. rescue the victims.
- B. determine the size of the incident.
- C. establish command.
- D. announce there is poisonous gas in the building.

Answer: B

Explanation:

This scenario suggests a potential multiple-casualty incident with a possible environmental hazard, such as carbon monoxide or another toxic gas. NREMT places strong emphasis on scene size-up as the first and most critical step in EMS operations.

Option B is correct because determining the size and scope of the incident allows the EMT to assess scene safety, identify hazards, estimate the number of patients, and determine the need for additional resources.

Entering the scene without this assessment could result in responder injury or death.

Option A is incorrect because establishing command typically follows an initial size-up. Command cannot be effectively established without understanding the nature of the incident.

Option C is incorrect because announcing the presence of poisonous gas without confirmation may cause panic and is not an appropriate first action.

Option D is incorrect because attempting rescue before confirming scene safety violates NREMT's core principle that rescuer safety comes first.

NREMT standards clearly state that EMTs must never enter a potentially hazardous scene until it has been properly assessed and deemed safe or appropriate resources are requested.

NEW QUESTION # 18

A 56-year-old patient has a severe headache. The patient is refusing any treatment or transport. The vital signs are BP 210/140 mmHg, P 112/min, R 20/min, and SpO₂ 98% on room air. Which of the following actions should the EMT perform next?

- A. Request law enforcement assistance.
- B. Obtain a repeat set of vital signs.
- C. Have the patient sign a refusal.
- D. Determine if the patient has decision-making capacity.

Answer: D

Explanation:

NREMT guidelines emphasize that patient refusal is only valid if the patient has decision-making capacity

. This patient has a severe headache with critically elevated blood pressure, which raises concern for conditions such as hypertensive emergency, intracranial hemorrhage, or stroke—all of which can impair cognition.

Option D is correct because the EMT must first determine whether the patient is alert, oriented, understands the risks, and can communicate a rational decision. Without capacity, a refusal is not legally or ethically valid.

Option A is incorrect because a refusal form should only be signed after capacity is confirmed.

Option B does not address the legal and ethical priority.

Option C is unnecessary unless the patient lacks capacity and poses a danger to themselves or others.

NREMT stresses that EMTs must protect patient autonomy while ensuring informed refusal, especially in high-risk presentations.

NEW QUESTION # 19

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