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NREMT Emergency Medical Technicians Exam Sample Questions (Q159-Q164):

NEW QUESTION # 159

A 44-year-old patient with diabetes feels weak and dizzy. The EMT provides oral glucose and transports the patient to the hospital, where the patient recovers. The EMT tells their partner they did not provide the patient with a blanket because they felt the patient was wasting their time. What best describes the action the EMT took?

- A. Breach of duty
- B. Battery
- C. Negligence

- D. Breach of ethics

Answer: C

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Negligence occurs when an EMT:

- * Has a duty to act
- * Breaches that duty (e.g., by withholding basic care like warmth)
- * Causes harm or risk of harm
- * Establishes causation

The EMT's failure to treat the patient with respect and dignity - even if the patient improved - still constitutes negligence, especially if tied to a discriminatory or dismissive attitude.

References:

NREMT Ethics & Legal Guidelines - Duty and Negligence

National EMS Education Standards - Professional Conduct

Brady Emergency Care (13th ed.), Chapter: Legal and Ethical Responsibilities

NEW QUESTION # 160

A 50-year-old patient has pain in the right calf. The patient describes the pain as cramping and soreness. The right calf is red, warm to the touch, and noticeably larger than the left calf. The patient's signs and symptoms are most likely caused by which of the following conditions?

- **A. Deep vein thrombosis**
- B. Hyperthermia
- C. Food poisoning
- D. Compartment syndrome

Answer: A

Explanation:

The correct answer is C. Deep vein thrombosis (DVT).

This question is testing recognition of classic signs and symptoms of a deep vein thrombosis, which is a blood clot forming in a deep vein, most commonly in the lower extremities.

The patient presents with hallmark findings:

- * Unilateral calf pain (cramping/soreness)
- * Swelling (one calf larger than the other)
- * Redness
- * Warmth to the touch

These findings strongly indicate DVT.

According to NREMT-aligned EMT educational material:

- * "Signs of deep vein thrombosis include swelling, pain, warmth, and redness of the affected extremity."
- * "DVT most commonly occurs in the legs and may present with unilateral swelling." Why the other options are incorrect:
- * A. Hyperthermia: A systemic condition involving elevated body temperature, not localized calf swelling and pain.
- * B. Food poisoning: Causes gastrointestinal symptoms such as nausea, vomiting, and diarrhea, not localized extremity findings.
- * D. Compartment syndrome: Typically presents with severe pain (often out of proportion), decreased pulses, pallor, paresthesia, and paralysis - not primarily redness and warmth. It is usually associated with trauma.

Clinical significance (important NREMT concept):

DVT is dangerous because the clot can dislodge and travel to the lungs, causing a pulmonary embolism, which is life-threatening.

NREMT guidance:

- * "A thrombus in a deep vein may dislodge and travel to the lungs, causing a pulmonary embolism." Exact Extracts:
- * "Signs of deep vein thrombosis include swelling, pain, warmth, and redness."
- * "DVT most often affects the lower extremities."

- * "A thrombus can break free and become an embolus, traveling to the lungs." References:

NREMT EMT Education Standards - Medical Emergencies

NREMT National Continued Competency Program (NCCP) - Cardiovascular/Medical Standard EMT Text (aligned with

NREMT): Cardiovascular and Hematologic Emergencies

NEW QUESTION # 161

Which of the following actions are appropriate management for two-rescuer pediatric basic life support?
Select the three correct options.

- A. Perform compressions at a ratio of 15:2
- B. Start CPR if the pulse rate is 72
- C. Compress the chest one-half the diameter of the chest
- D. Use the two-thumb-encircling-hands technique for infants
- E. Compress at a rate of 180 per minute
- F. Perform rescue breathing at a rate of 20 per minute

Answer: A,C,D

Explanation:

For pediatric BLS with two rescuers, current AHA Guidelines (2020) recommend:

* Two-thumb encircling hands technique: Most effective for infants; provides consistent depth and control.

* Compression ratio of 15:2: Enhances ventilation without compromising perfusion.

* Compression depth: 1/3 of chest or approximately one-half the chest's depth.

CPR begins if pulse < 60 bpm with signs of poor perfusion, not at 72 bpm. Rate of 180/min is excessive; ideal rate is 100-120/min.

References:

AHA BLS Provider Manual (2020) - Pediatric BLS Section

NREMT Cardiology and Resuscitation Module

Pediatric Advanced Life Support (PALS) Guidelines

NEW QUESTION # 162

What is the primary objective of transfer of care education?

- A. Consent concerns
- B. Clinical knowledge
- C. Patient safety
- D. Autonomy

Answer: C

Explanation:

The correct answer is B because the primary goal of transfer of care education in EMS is to ensure continuity of care and patient safety during the handoff process.

NREMT-aligned EMS education emphasizes that transferring care-from EMS to another provider (such as hospital staff)-must include clear, accurate communication of the patient's condition, treatments given, and any changes observed. This reduces medical errors, prevents loss of critical information, and ensures safe ongoing treatment.

Therefore, the central objective is maintaining patient safety through effective communication and continuity of care .

NEW QUESTION # 163

A 21-year-old patient has difficulty swallowing. The patient is leaning forward and drooling. The skin is hot to the touch. The vital signs are BP 128/82 mmHg, P 116/min, R 22/min, and SpO₂ 94% on room air. What should the EMT do for this patient? Select the two correct options.

- A. Suction the airway
- B. Transport the patient in a position of comfort
- C. Transport the patient in the recovery position
- D. Place the patient on CPAP
- E. Administer humidified oxygen

Answer: A,B

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

This patient is showing signs of epiglottitis or a serious upper airway obstruction- drooling, difficulty swallowing, fever, and tripod positioning.

EMT actions should include:

- * Position of comfort to avoid airway agitation
- * Gentle suctioning if secretions threaten airway

Do not force the patient to lie flat, as this may worsen airway compromise. CPAP and humidified oxygen may be considered in hospital care but not as first-line interventions during prehospital airway management in epiglottitis.

References:

NREMT Airway Management Guidelines - Upper Airway Obstruction

National EMS Education Standards - Respiratory Emergencies

AAOS Emergency Care and Transportation (11th ed.) - Chapter on Airway and Breathing Emergencies

NEW QUESTION # 164

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