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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)

Metrix TEST PREPARATION

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This EMT certification assists you to put your career on the right track and helps you to achieve your career goals in a short time period. There are several personal and professional benefits that you can gain after passing the Emergency Medical Technicians Exam (EMT) certification exam. The prominent EMT certification benefits include validation of skills and knowledge, more career opportunities, instant rise in salary, quick promotion, etc.

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NREMT Emergency Medical Technicians Exam Sample Questions (Q27-Q32):

NEW QUESTION # 27

In order for a plaintiff to recover damages in a lawsuit against an EMT, there must be a duty to perform, breach of duty, damage, and

- A. Contributory neglect
- B. Malfeasance
- C. Proximate causation

- D. Abandonment

Answer: C

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

To establish negligence, four legal elements must be proven:

- * Duty to act- a legal obligation to provide care.
- * Breach of duty- failing to meet the standard of care.
- * Damages- harm occurred.
- * Proximate causation- the breach directly caused the damage.

"Proximate causation" means the EMT's action or inaction is closely linked to the harm suffered by the patient.

References:

NREMT Candidate Handbook - Legal and Ethical Guidelines

"Emergency Care" (13th ed., Limmer & O'Keefe) - Chapter: Medical, Legal, and Ethical Issues National EMS Education Standards - Professionalism and Ethics

NEW QUESTION # 28

What components are necessary to maintain adequate perfusion? Select the three correct options.

- A. High alveolar pressure
- B. Patent airway
- C. Hypoxic drive
- D. Intact microcirculation
- E. Low ventilation-perfusion ratio
- F. Sufficient blood volume

Answer: B,D,F

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Perfusion refers to delivery of oxygen and nutrients to tissues. It depends on three essential components:

- * Patent airway: Ensures oxygen reaches lungs
- * Intact microcirculation: Capillary-level exchange must function
- * Sufficient blood volume: Maintains blood pressure and oxygen transport Hypoxic drive relates to COPD physiology, not perfusion. High alveolar pressure (like from CPAP) may impede venous return, and a low ventilation-perfusion ratio means poor oxygenation efficiency, which negatively affects perfusion.

References:

NREMT Cardiovascular and Shock Guidelines

National EMS Education Standards - Perfusion and Circulatory Assessment AHA ACLS Provider Manual - Systemic Perfusion Concepts

NEW QUESTION # 29

A 9-year-old patient who was injured in an MCI is brought to the treatment area with a delayed triage tag. Which of the following signs or symptoms would the EMT expect to find? Select the three correct options.

- A. Respiratory rate of 16
- B. Breathing only after opening the airway
- C. Ability to ambulate
- D. Mottled skin
- E. Follows simple commands
- F. Palpable pulses being present

Answer: C,E,F

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

In pediatric START or JumpSTART triage, a "delayed" status is appropriate if the child is breathing adequately, has palpable pulses, and follows commands. The respiratory rate of 16 is normal for a 9-year-old, and being able to walk also supports the "delayed"

tag.

"Mottled skin" and "breathing only after airway opening" would more likely lead to "immediate" or even "expectant" categories depending on associated symptoms.

References:

JumpSTART Pediatric MCI Triage Algorithm

National EMS Education Standards - Triage

PALS Provider Manual (American Heart Association)

NEW QUESTION # 30

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. Water
- C. Carbon dioxide
- D. Lactic acid

Answer: D

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 # 31

Which of the following would potentially complicate patient care during a helicopter transport?

- A. Maintaining 98% oxygen saturation
- B. Position of the patient's head within the aircraft
- C. Use of air splints to immobilize fractures
- D. Increase in the atmospheric humidity

Answer: B

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

The position of the patient's head within the aircraft affects access to airway management and crew maneuverability. If the head is oriented away from providers or toward a non-accessible bulkhead, this can delay critical interventions (airway suctioning, ventilations).

Use of air splints, maintaining oxygen saturation, or environmental humidity are not major complications relative to physical positioning and in-cabin access limitations.

References:

NREMT EMS Operations - Air Medical Transport

NAEMSP (National Association of EMS Physicians): Air Medical Guidelines EMS Helicopter Safety Protocols - FAA Advisory Circulars

NEW QUESTION # 32

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