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3. For the medication contained in a metered-dose inhaler to provide relief of asthma symptoms, it must come in contact with the...

- a. oral mucosa.
- b. trachea and main bronchi.
- c. bronchioles.
- d. alveoli.

4. A 54 year old female complained of difficulty breathing before becoming unresponsive. You attempted to place an oropharyngeal airway, but she started gagging. In which position should you position her?

- a. Prone
- b. Supine
- c. Semi-Fowler's
- d. Laterally recumbent

5. An unresponsive 36 year old female patient was found in the hallway of an office complex, moaning slightly. Her breathing is adequate, and she appears to have lost bladder control. After administering oxygen, you observe her mental status improving. You should suspect her presentation was most likely caused by...

- a. stroke.
- b. seizure.
- c. hypoglycemia.
- d. myocardial infarction.

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NREMT Emergency Medical Technicians Exam Sample Questions (Q64-Q69):

NEW QUESTION # 64

A 9-month-old patient is unresponsive in a crib. The patient is not breathing. Which of the following actions should the EMT perform first?

- A. Immediately transport.
- **B. Assess for a brachial pulse.**
- C. Begin chest compressions.
- D. Give two rescue breaths.

Answer: B

Explanation:

Comprehensive and Detailed Explanation (Based on NREMT standards):

In pediatric patients, NREMT guidelines require EMTs to check a pulse before initiating CPR when the patient is unresponsive and not breathing. For infants, the appropriate pulse check site is the brachial artery, assessed for no more than 10 seconds.

Option D is correct because determining whether a pulse is present guides whether rescue breathing or full CPR is required.

Option B is only appropriate if a pulse is present.

Option C is indicated only if no pulse is found or if the heart rate is below 60 with signs of poor perfusion.

Option A delays critical resuscitative care.

NREMT stresses strict adherence to pediatric resuscitation sequences to ensure appropriate and timely intervention.

NEW QUESTION # 65

The crew is requested to respond by law enforcement to a riot scene in a large downtown area. Upon arrival, the EMT notices the police are in full riot gear, with multiple persons lying on the ground under arrest. There is a strong odor of chemicals in the air. What actions should the EMT prioritize during the scene survey?

Select the two answer options that are correct.

- A. Have the police remove the patients' restraints.
- B. Flush the patients' eyes with water or saline.
- C. Remove the patients' clothing prior to triaging.
- **D. Identify the number of patients.**
- **E. Determine the control agent being used.**

Answer: D,E

Explanation:

Comprehensive and Detailed Explanation (Based on NREMT standards):

This scenario strongly suggests a hazardous environment involving chemical crowd-control agents such as tear gas or pepper spray.

During the scene survey, NREMT prioritizes scene safety, hazard recognition, and incident size-up before any patient contact.

Option D (Determine the control agent being used) is correct because identifying the chemical agent helps determine the level of risk,

appropriate personal protective equipment, and whether EMS can safely operate in the area.

Option E (Identify the number of patients) is correct because determining the number of patients is essential for assessing the scope of the incident and requesting additional resources if needed.

Option A is incorrect because removing restraints is not part of the initial scene survey and must be coordinated with law enforcement.

Option B is incorrect because patient decontamination occurs only after scene safety is ensured.

Option C is not a priority until hazards are identified and the scene is safe.

NREMT teaches that EMTs must never compromise their own safety and must fully assess hazards before providing care.

NEW QUESTION # 66

A 24-year-old male was injured in an explosion at a large factory. He is breathing shallowly at a rate of 40 and his capillary refill is 3 seconds. What color should you assign him for triage?

- A. Black
- B. Green
- C. Yellow
- **D. Red**

Answer: D

Explanation:

Using the START triage system, patients are categorized based on Respirations, Perfusion, and Mental Status (RPM).

A respiratory rate greater than 30 breaths per minute immediately qualifies the patient as RED (Immediate). Additionally, delayed capillary refill (>2 seconds) further supports this classification.

Option A is correct.

Option B applies to stable patients who can wait.

Option C is for deceased or nonsalvageable patients.

Option D is for minor injuries.

NREMT teaches that patients with compromised airway or perfusion are the highest priority.

NEW QUESTION # 67

A 65-year-old patient with a history of angina reports chest pain and shortness of breath after playing golf. The patient stated the pain began one hour ago and has not stopped with rest. The vital signs are BP 86/64, P 112, R 22, and SpO₂ 89% on room air. Which of the following actions should the EMT do next?

- A. Provide nebulized albuterol
- **B. Obtain a 12-lead ECG**
- C. Give nitroglycerin
- D. Administer CPAP

Answer: B

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

This is a high-risk cardiac event due to unstable angina or possible myocardial infarction. The EMT should:

* Administer oxygen if SpO₂ is <94%

* Avoid nitroglycerin if systolic BP is <90 mmHg

* Obtain a 12-lead ECG to identify ST-elevation MI (STEMI) and transmit it if trained and authorized CPAP is indicated for pulmonary edema, and albuterol is for bronchospasm, neither of which applies here.

References:

AHA ACLS and BLS Guidelines - ACS Management

NREMT Cardiology Guidelines - Chest Pain/MI

National EMS Education Standards - Cardiovascular Emergencies and ECG Recognition

NEW QUESTION # 68

What sound might indicate an upper airway obstruction in a patient?

- A. Bubbling
- B. Rhonchi
- C. Crowing
- D. Wheezing

Answer: C

Explanation:

Crowing, also known as stridor, is a high-pitched sound heard during inspiration and indicates upper airway obstruction, often caused by swelling, foreign body, or infection such as croup or epiglottitis.

Option D is correct.

Option A (Rhonchi) and B (Wheezing) are lower airway sounds.

Option C (Bubbling) suggests fluid in the airway, not obstruction.

NREMT emphasizes rapid recognition of stridor because upper airway obstruction can quickly become fatal.

NEW QUESTION # 69

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