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Following is the Test Prep EMT Exam Format

Format: Multiple choices, multiple answers

• Length of Examination: 120 minutes

• Passing score: 70%

• Number of Questions: 70-120

• Language: English

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Test Prep EMT Exam Introduction

The National Register Emergency Medical Technician (EMT) cognitive test is a computer adaptive test (CAT). This means that each candidate is evaluated based on the position of the responses on a spectrum. Once a candidate gets the correct answers, the computer will automatically enter more difficult questions to continue testing the candidate's skill level. The number of items a candidate can expect from the EMT exam will be between 70 and 120. Each exam will have between 60 and 110 "live" elements that will be counted towards the final score. The exam will also include 10 pilot questions that do not affect the final score. The maximum time allowed to complete the exam is 2 hours. To pass the exam, candidates must meet a standard skill level. The standard of success is defined by the ability to provide safe and effective entry-level emergency medical care.

NREMT Emergency Medical Technicians Exam Sample Questions (Q30-Q35):

NEW QUESTION #30

A patient has facial drooping, left side paralysis, and slurred speech. The vital signs are BP 160/100, P 100, R 20, and SpO2 96% on room air. Which of the following interventions is appropriate for this patient?

- A. Place the patient in a supine position
- B. Avoid asking the patient questions due to dysphasia
- C. Protect the left arm during transport
- D. Administer oxygen at 12 LPM

Answer: C

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

The patient's symptoms are consistent with astroke (CVA). Proper prehospital care focuses on maintaining airway, breathing, circulation, and protecting the affected limbs. Positioning the patient with head elevated (not supine) reduces intracranial pressure and aspiration risk.

Protecting theparalyzed side (e.g., left arm)from injury during transport is critical. EMS should still communicate with the patient - even if speech is impaired - and perform a stroke assessment using tools likeCincinnati Prehospital Stroke Scale (CPSS)orFAST. References:

NREMT Medical Emergencies: Neurological Conditions AHA Stroke Guidelines - Prehospital Management

National EMS Education Standards - Stroke Assessment Protocols

NEW OUESTION #31

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 SpO# 89% on room air. Which of the following actions should the EMT do next?

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

Answer: C

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

This is ahigh-risk cardiac eventdue to unstable angina or possiblemyocardial infarction. The EMT should:

- * Administer oxygenif SpO# is <94%
- * Avoid nitroglycerinif 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 forpulmonary edema, and albuterol is forbronchospasm, 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 #32

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

- A. Perform rescue breathing at a rate of 20 per minute
- B. Perform compressions at a ratio of 152
- 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. Start CPR if the pulse rate is 72

Answer: B,C,D

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Forpediatric BLS with two rescuers, currentAHA 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/minis excessive; ideal rate is 100-120/min. References:

AHA BLS Provider Manual (2020) - Pediatric BLS Section

NREMT Cardiology & Resuscitation Module

Pediatric Advanced Life Support (PALS) Guidelines

NEW QUESTION #33

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

Answer: A,B,C

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 #34

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

Answer: A,B,C

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

In pediatric START or JumpSTARTtriage, 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 #35

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