

Free PDF EMT - Emergency Medical Technicians Exam Latest Valid Exam Vce Free

EMT Practice Scenarios

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Here are several practice scenarios for emergency services providers. Review these scenarios with colleagues or team members. Focus on identifying key information, discussing critical factors, and considering appropriate responses based on your knowledge and experience.

As you analyze each situation, assess the associated risks, identify any additional information that may be necessary, and consider potential safety concerns. Be sure to address issues such as managing bystanders and apply any relevant protocols or best practices in your decision-making process.

Psychiatric emergency

You are dispatched to a home where a 32-year-old male has reportedly been exhibiting signs of severe agitation and confusion. He has been experiencing increasing anxiety and delusional thoughts over the past few days. Family members report that he has a history of mental health issues, including depression, but has recently stopped taking his prescribed medications. The patient is shouting incoherently and is resisting attempts to engage with him. There are no known weapons present, but the situation is escalating, and there are bystanders present in the vicinity.

Considerations:

Ensure scene safety and call for backup if needed. Assess the patient's airway, breathing, and circulation.

Attempt verbal deescalation.

Obtain vital signs and check for signs of distress.

If necessary, involve law enforcement or administer sedation.

Transport to an appropriate facility and document all actions taken.

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Candidates for national emergency medical technician certification must meet the following requirements:

- The successful parts of the cognitive and psychomotor exam remain valid for 24 months. For candidates whose course completion date is before November 1, 2018, the valid parts of each exam are valid for 12 months. Provided all other entry conditions are met.
- Pass state-approved cognitive (knowledge) and psychomotor (skills) tests.
- Have a current CPR-BLS for "healthcare provider" or equivalent credentials.
- Successful completion of a state-approved State Medical Technician (EMT) course that meets or exceeds the National Emergency Medical Service training standards for the emergency technician.

- Candidate must have completed the course in the last 2 years & the course director needs to verify the success of the course on the National Registry website.

There is the guide to get ready for the Test Prep EMT Exam

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NREMT Emergency Medical Technicians Exam Sample Questions (Q80-Q85):

NEW QUESTION # 80

Which of the following assessment findings indicates respiratory failure?

- A. Rapid respiratory rate
- B. Diaphoresis
- C. Accessory muscle use
- D. Altered mental status

Answer: D

Explanation:

NREMT distinguishes respiratory distress from respiratory failure. Respiratory distress includes compensatory signs such as tachypnea, accessory muscle use, and diaphoresis. Respiratory failure occurs when those compensatory mechanisms fail and the body can no longer maintain adequate oxygenation or ventilation.

Option D (Altered mental status) is the most reliable indicator of respiratory failure. According to NREMT, hypoxia and hypercapnia directly affect brain function, leading to confusion, agitation, lethargy, or unresponsiveness. This indicates that oxygen delivery to the brain is no longer adequate.

Option A is common in early respiratory distress.

Option B indicates increased work of breathing but not failure.

Option C reflects sympathetic activation, not failure.

NREMT teaches that mental status changes are late and ominous signs, requiring immediate airway and ventilatory support.

NEW QUESTION # 81

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

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 # 82

A 15-year-old patient is unresponsive following an assault. The patient has a stab wound on the chest, which is gurgling. The vital signs are BP 76/48 mmHg, P 146/min, R 26/min, and SpO₂ 90% on room air.

Which of the following types of shock is the most likely cause of the patient's presentation?

- A. Distributive
- B. Hypovolemic
- **C. Obstructive**
- D. Cardiogenic

Answer: C

Explanation:

Comprehensive and Detailed Explanation (Based on NREMT standards):

This patient has signs of penetrating chest trauma, severe hypotension, tachycardia, and respiratory distress.

A gurgling chest wound suggests an open pneumothorax, which can progress to tension pneumothorax.

Option C (Obstructive shock) is correct because air trapped in the chest can compress the heart and great vessels, preventing adequate cardiac output.

Option A is less likely because although blood loss may be present, the chest injury suggests impaired circulation due to pressure.

Option B involves pump failure, not trauma-related compression.

Option D involves abnormal vessel dilation, not mechanical obstruction.

NREMT emphasizes rapid recognition of obstructive shock and immediate intervention with occlusive dressings and rapid transport.

NEW QUESTION # 83

Which of the following techniques are appropriate for examining a patient with an acute abdomen?
Select the two correct options.

- A. Lie the patient supine with legs flexed
- B. Palpate the abdomen prior to auscultation
- C. Begin palpation with the most painful quadrant
- D. Press softly if the abdomen has a pulsating mass
- E. Visualize the abdomen before palpation

Answer: A,E

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

In patients with acute abdominal pain, you must first inspect (visualize) for distension, discoloration, or masses before touching. Palpation always begins away from the most painful area. The patient should be in a supine position with knees flexed to relax the abdominal muscles and ease the exam.

Palpating a pulsating mass could rupture an abdominal aortic aneurysm and is contraindicated.

References:

NREMT Cognitive Exam Blueprint - Medical Emergencies

Emergency Care and Transportation of the Sick and Injured (AAOS, 11th ed.) - Chapter: Abdominal and GI Emergencies EMT-B

National Standard Curriculum, Module: Medical Emergencies

NEW QUESTION # 84

A program whose efforts are to limit the effects of an injury or illness that you cannot completely prevent is called

- A. Reactive prevention
- B. Secondary prevention
- C. Primary prevention
- D. Proactive prevention

Answer: B

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Secondary prevention focuses on early detection and intervention to reduce the severity or impact of an illness or injury that has already occurred or is inevitable. Examples in EMS include:

- * AED deployment in public
- * Stroke recognition training
- * Early CPR

Primary prevention aims to stop the injury from occurring at all (e.g., vaccination, seatbelts). "Reactive" and "proactive" are not recognized formal categories in EMS public health strategy.

References:

NREMT Public Health and EMS Prevention Models

CDC Injury Prevention Framework

EMS Agenda for the Future - Preventive and Community-Based EMS Care

NEW QUESTION # 85

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