

# EMT Latest Practice Torrent & EMT Free docs & EMT Exam Vce

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## EMT Practice Test Questions and Answers(Latest Update 2023-2024)

What is the rate of CPR in breaths and compressions? - ANSWER 6 breaths and 110 compressions in a minute

What is considered tachycardic for an adult? - ANSWER heart rate more than 100

What is considered bradycardic for an adult? - ANSWER Heart rate less than 60

When is nitroglycerin not advised to be administered? - ANSWER if the systolic blood pressure is less than 100

Where does blood flow after it leaves the left ventricle? - ANSWER it flows to the aortic arch

What medication is Erectile Dysfunction medications a contraindication? - ANSWER nitroglycerin

What is the parasympathetic system responsible for? - ANSWER slowing the heart rate and intestinal activity

What is the function of the carotid artery? - ANSWER it carries blood from the heart to the head

Are open ended or close ended questions better to ask? - ANSWER open ended questions; it avoids the yes/no answer

what delivers blood to the right atrium? - ANSWER the superior and inferior vena cava

What does diastolic blood pressure refer to? - ANSWER it refers to the pressure of the vessels during the relaxation phase; bottom of the blood pressure

What is TIA - ANSWER transient ischemic attack; this is where vessels in the brain are blocked for a few minutes

When do you change roles during CPR? - ANSWER every two minutes

What is another name for a heart attack? - ANSWER acute myocardial infarction

What does nitroglycerin do? - ANSWER nitroglycerin dilates the vessels to reduce the hearts preload

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

### NEW QUESTION # 30

Which of the following conditions would most likely result in pulmonary edema? Select the two correct options.

- A. Aortic dissection
- B. Left-sided heart failure
- C. Increased oncotic pressure
- D. Hypertensive crisis
- E. Severe anaphylaxis

**Answer: B,D**

Explanation:

Pulmonary edema is caused by fluid accumulation in the alveoli, impairing gas exchange. It is typically due to:

Left-sided heart failure: Blood backs up into the pulmonary circulation Hypertensive crisis: Increases hydrostatic pressure in the lungs

Anaphylaxis causes vasodilation and bronchospasm, not fluid overload. Increased oncotic pressure would retain fluid in capillaries - the opposite of edema.

References:

NREMT Medical Module - Respiratory and Cardiovascular Integration

AHA ACLS Guidelines - Congestive Heart Failure

AAOS EMT Textbook - Pathophysiology of Pulmonary Edema

### NEW QUESTION # 31

A 24-year-old patient is unresponsive after a metal rod impaled through the mandible and out of the mouth.

There are copious amounts of hemorrhaging in the mouth. What action should the EMT take first?

- A. Provide continuous suctioning.
- B. Initiate rapid transport.
- C. Stabilize the impaled object.
- D. Establish manual cervical motion restriction.

**Answer: A**

Explanation:

The correct answer is C. Provide continuous suctioning.

This scenario involves a life-threatening airway emergency. The patient is:

\* Unresponsive

\* Has massive oral bleeding

\* Has an impaled object through the mouth

The immediate priority according to NREMT principles is airway management, following the ABCs (Airway, Breathing, Circulation).

Copious blood in the airway presents an immediate obstruction risk, which can rapidly lead to hypoxia and death if not addressed.

Therefore, the first action is to:

\* Clear the airway using suction

NREMT-aligned guidance states:

\* "Airway management is the highest priority in trauma patients."

\* "Suction should be used immediately when blood or secretions obstruct the airway." Why the other options are incorrect:

\* A. Initiate rapid transport: Important, but airway must be secured before transport.

\* B. Stabilize the impaled object: Also important, but not before managing a compromised airway.

\* D. Establish manual cervical motion restriction: Should be done, but airway takes precedence over spinal precautions.

Key NREMT Principle:

\* "If airway and spinal precautions conflict, airway management takes priority." Exact Extracts:

\* "Airway is the first priority in patient assessment."

\* "Suction is required when blood or vomitus threatens the airway."

\* "Airway management takes precedence over spinal immobilization."

References:

NREMT EMT Education Standards - Trauma Assessment

NREMT National Continued Competency Program (NCCP) - Airway & Trauma

Standard EMT Text (aligned with NREMT): Airway Management and Trauma Care

### NEW QUESTION # 32

A patient who is 30 weeks pregnant is in cardiac arrest after being hit by a car. How should the EMT proceed?

Select the two answer options that are correct.

- A. Perform compressions at a depth of at least two inches.
- B. Avoid using the AED due to fetal detriment.
- C. Request a medical helicopter to transport the patient.
- D. Provide left uterine displacement.
- E. Perform compressions on the upper half of the sternum.

**Answer: A,D**

Explanation:

The correct answers are A. Provide left uterine displacement and E. Perform compressions at a depth of at least two inches.

Key Concept: Cardiac Arrest in Late Pregnancy

At #20 weeks gestation (30 weeks in this case):

The enlarged uterus compresses the inferior vena cava (IVC) when the patient is supine. This reduces venous return and cardiac output, worsening resuscitation effectiveness. Why A is correct (Left uterine displacement):

The uterus should be manually displaced to the left side.

This relieves pressure on the IVC and improves circulation during CPR.

NREMT/AHA-aligned guidance states:

"Manual left uterine displacement should be performed in pregnant patients during resuscitation." Why E is correct (Compression depth):

CPR in pregnant patients follows standard adult CPR guidelines.

Compression depth should be at least 2 inches (5 cm).

"Perform high-quality chest compressions at a depth of at least 2 inches." Why the other options are incorrect:

B). Avoid using AED# Incorrect - AED is safe and indicated in pregnancy.

"Defibrillation should not be withheld in pregnant patients."

C). Request a helicopter# Not a priority during active cardiac arrest - resuscitation comes first D). Upper half of sternum# Incorrect - compressions are performed on the center of the chest (lower half of sternum). Exact Extracts (NREMT/AHA-aligned references):

"Perform manual uterine displacement in late pregnancy during CPR."

"Use standard CPR compression depth and rate."

"Defibrillation is safe in pregnancy and should not be delayed."

Clinical Priority Summary:

In a pregnant cardiac arrest patient, the EMT should perform standard high-quality CPR while relieving uterine pressure on major vessels, making A and E the correct answers.

References:

NREMT EMT Education Standards - Cardiology & Resuscitation

American Heart Association (AHA) Guidelines for CPR and ECC

NREMT National Continued Competency Program (NCCP)

### NEW QUESTION # 33

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

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

**Answer: B,E,F**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

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 80/min is 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 # 34

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

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

**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 # 35

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