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There are Candidates must know the topics before they start of preparation.

Our **Test Prep EMT Exam Dumps** will include the following topics:

- Cardiology and Resuscitation 19%
- EMS Operations 12%
- Medical / Obstetrics / Gynecology 28%
- Trauma 21%
- Airway, Respiration, and Ventilation 20%

NREMT Emergency Medical Technicians Exam Sample Questions (Q61-Q66):

NEW QUESTION # 61

While responding to an emergency, a car is tailgating the ambulance. Which of the following actions should the EMT take?

- A. Pull over
- B. Slow down
- C. Speed up
- **D. Tap the brakes**

Answer: D

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

In situations where a vehicle is tailgating an emergency unit, tapping the brakes briefly is a standard defensive driving maneuver to alert the driver behind to increase distance. It is less risky than slowing dramatically or pulling over, which could endanger crew or delay response.

Speeding up could reduce your reaction window or increase accident risk. EMS operators must follow safe driving practices per NFPA 1002 and DOT Emergency Vehicle Operation Guidelines.

References:

NREMT Operations Section - Driving and Scene Safety

NFPA 1002: Standard for Fire Apparatus Driver/Operator Professional Qualifications

U.S. DOT: Emergency Vehicle Operator Course (EVOC)

NEW QUESTION # 62

The most common finding in a patient who is experiencing a sickle cell crisis is

- A. Cardiac arrhythmia
- B. Hypertension
- **C. Pain**
- D. Hypoxia

Answer: C

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Sickle cell crisis (vaso-occlusive crisis) occurs when abnormally shaped red blood cells obstruct blood flow, leading to:

- * Severe localized or generalized pain (most common symptom)
- * Often in the back, chest, abdomen, or long bones

Hypoxia may be a contributing factor, but pain is the most reported reason for EMS activation. Cardiac arrhythmias and hypertension are not primary symptoms of sickle cell crisis.

References:

NREMT Medical Guidelines - Hematologic Disorders

AAOS Emergency Care and Transportation (11th ed.) - Chapter on Hematologic Emergencies National Heart, Lung, and Blood Institute - Sickle Cell Disease Management

NEW QUESTION # 63

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

Answer: A,C,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 # 64

A 3-year-old patient ingested laundry detergent. The patient is drowsy and has crackles in all lung fields. What should most concern the EMT at this time? Select the three answer options that are correct.

- **A. Esophageal perforation**
- **B. Respiratory failure**
- C. Hypoglycemia
- **D. Vomiting**
- E. Acid reflux
- F. Seizure

Answer: A,B,D

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Laundry detergent ingestion - especially in the case of liquid detergent pods - is associated with caustic airway and gastrointestinal injuries. The presence of crackles and drowsiness are signs of aspiration and possible respiratory failure. Vomiting increases the risk of aspiration pneumonia, and esophageal perforation is a life-threatening complication from corrosive ingestion.

While seizure and hypoglycemia are possible complications of toxic ingestion, they are not as immediately linked to the detergent profile as airway injury and aspiration risk.

References:

NREMT Pediatric Toxicology and Airway Emergencies

National Poison Data System (NPDS) Annual Report

AAOS Emergency Care Textbook (11th ed.) - Pediatric Poisoning and Toxin Exposure

NEW QUESTION # 65

A 31-year-old patient has an open femur fracture and an unstable pelvis after falling 15 feet. They are conscious and responsive to verbal stimuli. The vital signs are BP 86/42, P 136, R 24, and SpO₂ 92% on room air. The patient has which of the following types of shock? Select the two correct options.

- A. Hypovolemic
- B. Decompensated
- C. Distributive
- D. Compensated
- E. Obstructive

Answer: A,B

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

This is a classic presentation of hypovolemic shock due to traumatic blood loss (open femur fracture, pelvic instability). Indicators include:

* Low BP (86/42) = hypotension

* High pulse (P 136) = compensation

* Mental status decline (responsive only to voice) = indicates decompensated shock. Obstructive and distributive shock are not applicable. Compensated shock would show normal BP and alert mental status.

References:

NREMT Shock Management and Trauma Guidelines

National EMS Education Standards - Hemorrhagic and Non-Hemorrhagic Shock AAOS EMT Textbook - Chapter: Types of Shock

NEW QUESTION # 66

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