



EMT B Practice Test

Practice Questions:

Questions 1 to 3 pertain to the following scenario:

You and your partner are called to the home of a 75-year-old man complaining of severe pain in the chest and nausea. As the patient is being assessed, he suddenly loses consciousness.

1. The first step in treating a patient with severe chest pain is:
 - a. obtain a patient history.
 - b. administer oxygen.
 - c. perform a physical exam.
 - d. obtain baseline vital signs.

2. The first step in treating a patient who loses consciousness is to:
 - a. obtain a pulse.
 - b. assess breathing.
 - c. attach an automated external defibrillator.
 - d. open the airway.

3. The best way to decrease oxygen demand in the case of cardiac compromise is to:
 - a. transport the patient immediately, flashing lights and using siren.
 - b. reassure the patient.
 - c. travel at high speed but without the siren.
 - d. give the patient nitroglycerin.

Questions 4 to 6 pertain to the following scenario:

You receive a call from the mother of a 3-year-old girl. The mother believes her daughter has “swallowed something.” When you arrive, the child does not acknowledge your presence. She has a high fever and a generalized rash.

4. Proper care for a small child with possible airway obstruction consists of:
 - a. performing a finger sweep.
 - b. relieving mild airway obstruction.
 - c. avoiding agitation of the child and providing transport.
 - d. applying back blows and abdominal thrusts.

5. When a young child does not acknowledge the presence of a stranger in his or her environment, this is indicative of:
 - a. altered mental state.
 - b. allergic reaction.

- c. sleep.
- d. age-appropriate behavior.

6. A child with inattentive behavior, high fever, and generalized rash should be monitored for:
- a. dehydration.
 - b. projectile vomiting.
 - c. cardiac failure.
 - d. seizures.

7. In which of the following patients is rapid trauma assessment most urgently needed?
- a. A 90-year-old woman with pain in the right upper quadrant.
 - b. A conscious 50-year-old man who fell from the roof of his home and landed on his left arm.
 - c. A conscious 25-year-old store clerk who was stabbed in the abdomen during an attempted robbery.
 - d. An 8-year-old boy complaining of pain in the right lower quadrant of the abdomen.

8. You receive a call from a young woman whose car has been struck in a shopping mall parking lot. She is concerned about the elderly man who backed into her car. On arrival at the scene, you find a conscious 88-year-old man who appears to be having an acute ischemic stroke. The most appropriate course of action would be to:
- a. perform a physical exam.
 - b. administer oxygen and obtain a patient history.
 - c. monitor blood pressure.
 - d. administer oxygen and provide transport to the hospital for fibrinolytic therapy.

Questions 9 and 10 refer to the following scenario:

The husband of a pregnant 21-year-old woman calls for assistance, fearing that his wife is about to deliver “any minute.” On arrival, delivery does not appear to be imminent; however, during transport, crowning occurs.

9. The most appropriate course of action is to:
- a. check for the presence of the amniotic sac.
 - b. reassure the mother and wait for arrival at the hospital.
 - c. apply gentle pressure to the infant’s head.
 - d. gently slide the infant back into the birth canal.

10. On delivery, the infant is not breathing adequately and the umbilical cord is pulsating. You should immediately:
- a. pull on the umbilical cord.
 - b. leave the umbilical cord attached until arrival at the hospital.
 - c. clamp and cut the umbilical cord.
 - d. clamp the umbilical cord and await arrival at the hospital.

Questions 11 to 13 pertain to the following scenario:

The manager of a fast-food restaurant calls to report that an elderly woman is choking. On arrival, you find an 80-year-old woman in a wheelchair in obvious respiratory distress. On

breathing assessment, you observe that the patient's dentures are loose and ill-fitting. She then begins to make gurgling sounds.

11. The first step in evaluating the airway of an elderly person is to:

- a. extend the head and flex the neck.
- b. thrust the jaw forward to pull the tongue out of the airway.
- c. find a radial pulse.
- d. suction for 30 seconds.

12. While evaluating the airway, you notice there may be some difficulty in ventilating the patient. You should proceed by:

- a. removing the patient's dentures.
- b. suctioning for 30 seconds.
- c. initiating the gag reflex.
- d. offering high-concentration oxygen.

13. The presence of gurgling sounds in this patient indicates that:

- a. the patient is in cardiac arrest.
- b. the patient is in an altered mental state.
- c. the patient requires suctioning.
- d. the patient is having an acute ischemic attack.

14. You arrive at the home of a 75-year-old woman who has had a fall. In addition to assessing potential injuries, you should:

- a. assess mental status.
- b. oxygenate the patient.
- c. assess potential causes of the fall.
- d. assess circulation.

15. Which of the following drugs are most often carried on an ambulance?

- a. Nitroglycerin
- b. Epinephrine
- c. Inhalers
- d. Oral glucose

16. Which of the following drugs can an EMT-B assist a patient in taking?

- a. Nitroglycerin
- b. Amitriptyline
- c. Verapamil
- d. Nifedipine

Questions 17 to 19 pertain to the following scenario:

You are called to the scene of a traffic accident involving a mother and her 2-year-old son. On arrival, both mother and child are bleeding from the head. The mother is conscious and alert and informs you that while she has sustained "just a scratch," her son is "seriously hurt." The boy has a laceration on the top of his head. On examination, he exhibits signs of hypoperfusion.

17. One of the most common causes of hypoperfusion in infants and children is:

- a. heart failure.
- b. blood loss.
- c. a stressful event.
- d. lack of oxygen.

18. Which of the following is a sign of hypoperfusion in children?

- a. Crying.
- b. Rapid pulse.
- c. Rapid respiratory rate.
- d. Increased urinary output.

19. The best course of care for this child is to:

- a. wait for signs of decompensated shock.
- b. perform airway clearance.
- c. monitor blood pressure.
- d. keep the child warm.

20. The most likely cause of cardiac arrest in a child is:

- a. respiratory failure.
- b. hypothermia.
- c. mitral valve prolapse.
- d. asthma attack.

Questions 21 to 23 pertain to the following scenario:

The morning after a snow storm, the ski patrol discover the wreckage of an automobile on the road to a ski lodge. A 70-year-old man is trapped inside. He is disoriented but conscious and has suffered a broken hip. He exhibits severe muscular rigidity and has no memory of the events before or after the accident. The patient's wife had reported the man missing the previous night after he became intoxicated and was ejected from a local bar.

21. In addition to a broken hip, this patient is suffering from:

- a. hypoperfusion.
- b. inadequate circulation.
- c. hypothermia.
- d. psychiatric disorder.

22. To prevent heat loss in an injured patient, you should:

- a. perform active rewarming techniques.
- b. massage the extremities.
- c. administer a stimulant.
- d. use blankets to provide a barrier to the outside.

23. Body heat loss is often associated with:

- a. alcohol intoxication.
- b. head trauma.

- c. cardiac events.
- d. altered mental status.

24. The signs and symptoms of carbon monoxide poisoning most closely resemble those of:

- a. smoke inhalation.
- b. flu.
- c. food poisoning.
- d. drug overdose.

25. You receive an urgent call from the mother of a 15-year-old-boy who has accidentally splashed disinfectant in his eye while performing his weekly chore of cleaning the bathroom. The best way to treat the boy is to

- a. irrigate the eye with clean water for 20 minutes if an alkali or 10 minutes if an acid.
- b. irrigate the eye with diluted vinegar.
- c. irrigate the eye with baking soda and water.
- d. transport the patient to the hospital immediately.

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EMT B Practice Test Answers

Answer Key

1. B- The first step in treating a patient with potential cardiac arrest is to administer oxygen. At that point, you should obtain a patient history and perform a physical exam to obtain baseline vital signs.
2. D- When a patient loses consciousness, the first step is to open the airway. If you find the patient to be in cardiac arrest based on your initial assessment, you should attach an automated external defibrillator.
3. B- In addition to administering oxygen, the most effective way to decrease oxygen demand is to calm and reassure the patient. Driving at high speed, flashing lights, or turning on the siren will only heighten the patient's distress.
4. C- In a young child with possible airway obstruction, attempts to remove a mild obstruction may result in severe obstruction. Back blows and chest thrusts should only be performed in the case of a severe obstruction, and finger sweeps only when the child is unconscious and the object is visible in the mouth. The most appropriate course of action is to avoid agitating the child and provide immediate transport to the hospital.
5. A- Young children typically fear a stranger in their environment and will maintain eye contact with that person. Thus, inattentiveness to your presence is indicative of an altered mental state.
6. D- High fever, generalized rash, and altered mental state are indicative of meningitis, or inflammation of the tissue protecting the brain and spinal cord. Because a child with meningitis is at high risk for seizures, his or her condition should be carefully monitored during transport to the hospital.
- 7.C- Rapid trauma assessment is indicated in patients with significant mechanisms of injury, such as penetrating wounds to the head, neck, chest, or abdomen, falls from a height of >15 feet (such as from a tall building), or multiple long bone fractures.
8. D- In patients with acute ischemic stroke, administering oxygen is the most important first step, followed by rapid transport to the hospital for fibrinolytic therapy. Fibrinolytic therapy must be performed within 3 hours of symptom onset.

9. C- Crowning indicates that the second stage of labor has begun and delivery is imminent. After stopping the ambulance, gentle pressure should be applied to the infant's head to avoid explosive delivery.

10. B- If the umbilical cord continues to pulsate and the infant is not breathing adequately, the cord should remain attached and the head of the infant kept at the level of the mother's perineum until arrival at the hospital. The umbilical cord should not be clamped or cut until the cord has stopped pulsating and the infant has begun to breathe normally.

11. B- It may be difficult to extend the head and flex the neck of an elderly person because of arthritic conditions. The head of an elderly person should never be forced back. Rather, the jaw should be thrust forward and the tongue pulled out of the airway.

12. A- Two major risk factors for airway obstruction in elderly patients are poorly chewed food and dentures. If dentures are loose or ill-fitting and/or obstruct efforts to ventilate the patient, they should be removed.

13. C- When a patient begins to make gurgling sounds, whether before, during, or after ventilation, he or she should be suctioned immediately; however, a patient should be properly oxygenated before suctioning.

14. C- An EMT-B can help prevent future falls in an elderly patient by assessing the patient's home for potential hazards, such as slippery rugs or obstructive furniture.

15. D- Oral glucose, activated charcoal, and oxygen are carried on an ambulance and may be administered to a patient under certain circumstances.

16. A- If previously prescribed for the patient, the EMT-B may assist him or her in taking nitroglycerin, epinephrine, or inhalers. Permission from medical direction may be required.

17. B- Blood loss, trauma, particularly from abdominal injury, infection, and dehydration resulting from diarrhea or vomiting are the most common causes of hypoperfusion in infants and children. Bleeding that may not seem serious in an adult may lead to hypoperfusion in a child.

18. C- Signs of hypoperfusion in a child include rapid respiratory rate, pale, clammy skin, weak or absent peripheral pulse, and decreased urinary output.

19. D- Because infants and children may go into decompensated shock rapidly, never wait for signs of decompensated shock to develop. Supplemental oxygen should be provided, external bleeding managed, and artificial ventilation begun if necessary. The child should be kept warm and transported immediately to the hospital.

20. A- Although a cardiac condition is the most likely cause of cardiac arrest in adults, respiratory failure is the most likely cause in children. Breathing difficulties in children may result from airway obstruction or respiratory disease.

21. C- Because the patient has been lying in the cold all night, he is most likely suffering from hypothermia. Signs of hypothermia include muscular rigidity, amnesia, and loss of contact with environment.

22. D- The best course of action to prevent additional body heat loss in an injured patient trapped in cold environment is to create a barrier to the cold. Blankets or articles of clothing can be used to protect the patient from exposure to wind or water. Active rewarming may result in cardiac arrest, and ingestion of stimulants in impaired circulation.

23. A- Individuals under the influence of alcohol or drugs may be more susceptible to hypothermia. The fact that the patient had been drinking and was trapped overnight in a cold environment places him at high risk of hypothermia.

24. B- The signs and symptoms of carbon monoxide poisoning may resemble those of the flu, including nausea and headache.

25. A- The first step in treating a patient with an absorbed poison is to remove the poison from the eyes or skin immediately. This may be accomplished by irrigating the eye or skin with clean water for 20 minutes. Attempting to neutralize the absorbed substance with other solutions such as vinegar or baking soda may make the injury worse.

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