Advanced EMT PreEmployment Study Guide

AEMT Exam

Version 2019.1

- 1) EMTs should wear high-efficiency particulate air (HEPA) respirators when they are in contact with patients who have which of the following:
 - a. HIV (Human Immunodeficiency Virus)
 - b. Tuberculosis
 - c. Open Wounds
 - d. Hepatitis B
- 2) Your patient tells you she is having trouble breathing and some chest pain. She is in her late sixties. She is tachypneic, tachycardic, and is hypertensive. She is sitting on the edge of her chair and you notice she has JVD. You would suspect that this patient is suffering from:
 - a. Asthma
 - b. COPD
 - c. CHF
 - d. Pneumonia
- 3) The most common electrical rhythm disturbance that results in sudden cardiac arrest is called:
 - a. PEA (Pulseless Electrical Activity)
 - b. V-Fib (Ventricular Fibrillation)
 - c. A-Fib (Atrial Fibrillation)
 - d. Asystole
- 4) Which of the following is a classic sign of central abrupto placentae?
 - a. Sudden sharp, tearing pain
 - b. Massive bright red hemorrhaging from the vagina
 - c. No pain
 - d. All of the above
- 5) Of the following, which bodily fluid has the most potential to transmit blood-borne pathogens?
 - a. Nasal Discharge
 - b. Urine
 - c. Amniotic Fluid
 - d. Feces

- 6) Your patient is an 11-month-old female. How can you determine if she has decreased mental status and is responsive to verbal stimuli?
 - a. She will be upset when you take her from her mother's arms
 - b. She will be unable to tell you how old she is if you ask her
 - c. She will attempt to locate her parents' voices when they speak
 - d. She will try to pull away from painful stimulus on her toe
- 7) What is the best method to assess circulation in an infant?
 - a. Palpate the carotid pulse
 - b. Palpate the brachial pulse
 - c. Palpate the radial pulse
 - d. Palpate the femoral pulse
- 8) You are treating a 68-year-old male complaining of chest pain. After establishing IV access, you check his vital signs to ensure:
 - a. His blood pressure is above 100 mmHg systolic
 - b. His blood pressure is above 120 mmHg systolic
 - c. His pulse is above 60 beats per minute
 - d. His pulse is under 100 beats per minute
- 9) You are treating a patient who was removed from a house fire. The patient does not appear to have any major burns; however, you notice soot on the patient's face and body. You should be concerned about:
 - a. The patient's airway & cyanide exposure
 - b. How to clean the soot from the patient
 - c. The patient vomiting
 - d. Eschar
- 10) Which of the following is a sign of increased pressure in the circulatory system?
 - a. Flat neck veins
 - b. Palpable carotid pulse
 - c. Distended jugular veins
 - d. Decreased radial pulse
- 11) An automated external defibrillator (AED) will shock which of the following rhythms?
 - a. Ventricular Tachycardia (V-Tach) and Asystole
 - b. Ventricular Fibrillation (V-Fib) and Atrial Fibrillation (A-Fib)
 - c. Pulseless Electrical Activity (PEA) and Asystole
 - d. Ventricular Tachycardia (V-Tach) and Ventricular Fibrillation (V-Fib)

12) To assess motor function in the lower extremities of a responsive adult patient, you would:

- a. Ask the patient to bend his knee
- b. Ask the patient to wiggle his toes
- c. Carefully move the patient's leg up and down
- d. Touch the skin of the patient's foot

13) Which patient can safely receive only a focused physical examination rather than a rapid trauma assessment?

- a. 10-year-old male with a deformed right lower leg who is responsive after falling off his bicycle
- 20-year-old female who complains of severe pain in her ankle after stepping off of a curb
- c. 70-year-old male who complains of neck pain after a moderate-speed motor vehicle collision
- d. 30-year-old male who is unresponsive but has only minor cuts to his hands

14) You are using the OPQRST acronym to assess a responsive medical patient. What question would you ask the patient to assess the P component?

- a. What were you doing when the pain started?
- b. Can you describe the character of the pain for me?
- c. What makes the pain feel better or worse?
- d. On a scale of 1-10, how would you rank the pain?

15) You find a 4-year-old patient unresponsive. He is not breathing normally, you find that he has a pulse of 42 beats per minute, and you note cyanosis. What are your next actions?

- a. Provide a rescue breath every 3-5 seconds and continually re-assess
- b. Roll the patient into recovery position until ready for transport
- c. Provide high-flow oxygen via a Non-Rebreather and insert an airway adjunct
- d. Provide a rescue breath every 3-5 seconds, and begin chest compressions

16) Which patient requires a detailed physical examination?

- a. 48-year-old male with a history of heart disease who is complaining of chest pain
- b. 35-year-old female who has been in a single-car collision and who briefly lost consciousness
- 28-year-old full-term pregnant female whose water has broken and who is having contractions every two minutes
- d. 53-year-old female with a history of smoking who is distressed and short of breath

17) Where is the detailed physical exam typically performed?

- a. At the scene of the accident or injury
- b. In the hospital emergency department
- c. In the ambulance during transport
- d. In the triage area of a trauma center

18) The purpose of the on-going assessment is to re-evaluate the patient's condition and to:

- a. Find any injuries missed during the initial assessment
- b. Reassure the patient that you are still caring for him/her
- c. Check the adequacy of each intervention performed
- d. Protect the EMT or Paramedic against liability from malpractice lawsuits

19) Immediately after delivering a shock with an AED to a patient in cardiac arrest, you should:

- a. Check for a carotid pulse and, if needed, begin CPR
- b. Check for breathing and provide two rescue breaths if necessary
- c. Turn off the AED. You will turn it back on in two minutes
- d. Resume CPR, starting with chest compressions

20) You should apply an AED to which patient?

- a. An adult male experiencing chest discomfort
- b. An adult female with significant traumatic injuries and a pulse of 60 beats per minute
- c. An adult male who has overdosed on heroin, is unresponsive, apneic, and has a pulse
- d. An adult male who is unresponsive, apneic, and does not have a pulse

21) Your patient is complaining of right-sided weakness. You notice that her face is drooping on the left side. She is having difficulty speaking and appears to be drooling. She is hypertensive and seems to be confused. You would suspect that this patient is most likely experiencing:

- a. Insulin Shock
- b. A Cerebral Vascular Accident (CVA)
- c. An epidural hematoma
- d. A seizure

22) What is the structure that prevents food and liquid from entering the trachea during swallowing?

- a. Cricoid Cartilage
- b. Larynx
- c. Epiglottis
- d. Diaphragm

23) The air sacs in the lungs where O2/CO2 exchange occurs are the:

- a. Bronchioles
- b. Bronchi
- c. Epiglottis
- d. Alveoli

24) Pink or bloody sputum is often seen in patients with:

- a. Anaphylaxis
- b. Influenza
- c. Pulmonary Edema
- d. Asthma

- 25) Your patient is a 56 pound 8-year-old male who is hypotensive and complaining of shortness of breath and severe abdominal pain. He says he thinks he might have accidentally eaten peanuts, which he is allergic to. You do not find any edema or signs of urticaria. The appropriate treatment would be:
 - a. Administer 500 ml NS fluid bolus, transport, and monitor for any changes
 - b. Administer 250 ml NS fluid bolus, transport, and monitor for any changes
 - c. Administer 0.3mg of Epi 1:1,000 IM
 - d. Administer 0.15mg of Epi 1:1,000 IM
- 26) Which of the following is a sign of inadequate breathing?
 - a. Warm, pink, dry skin
 - b. Equal rise and fall of the chest
 - c. Accessory Muscle use when breathing
 - d. Speaking in complete sentences without difficulty
- 27) A patient complaining of facial paralysis on one side of his face with tearing, localized pain, and sensitivity may be suffering from the most common form of facial paralysis called:
 - a. Dystonia
 - b. Muscular Dystrophy
 - c. Amyotrophic Lateral Sclerosis (ALS)
 - d. Bell's Palsy
- 28) A gurgling sound heard with artificial ventilation is a sign that:
 - a. The patient must be suctioned immediately
 - b. Supplemental Oxygen should be added to the bag-valve mask
 - c. The airway is most likely open, patent, and clear
 - d. The patient is trying to communicate with you
- 29) The first step in artificial ventilation with a bag-valve-mask unit in patients with suspected trauma is to:
 - a. Place the patient's head in a hyperextended, sniffing position
 - b. Insert an airway adjunct and select the correct mask size
 - c. This patient cannot be ventilated with a bag-valve-mask
 - d. Have an assistant squeeze the bag until the patient's chest rises
- 30) Which of the following classifications of drugs most likely causes psychosis, nausea, dilated pupils, rambling speech, headache, dizziness, and distortion of sensory perceptions?
 - a. Benzodiazepines
 - b. Opiates
 - c. Amphetamines
 - d. Hallucinogens

31) When suctioning an adult patient, how long should you suction for?

- a. 20-25 seconds
- b. 10 seconds or less
- c. At least 30 seconds
- d. 30 seconds or less

32) What is the correct procedure for a patient who has secretions or emesis that suctioning cannot easily remove?

- a. Insert an oropharyngeal or nasopharyngeal airway immediately
- b. Suction for 55 seconds, ventilate for two minutes, and then repeat
- c. Logroll the patient and clear the oropharynx and nasopharynx
- d. Hyperventilate the patient with a bag-valve mask

33) What is the purpose of the head-tilt/chin-lift technique?

- a. To remove foreign bodies from the upper airway
- b. To prevent the patient from vomiting
- c. To lift the tongue and epiglottis out of an obstructing position
- d. To prepare for suctioning

34) After opening the airway, the next step in patient management is to:

- a. Insert an endotracheal tube
- b. Assess the adequacy of respirations
- c. Begin mouth-to-mouth ventilations
- d. Apply a non-rebreather mask

35) When using the two-person bag-valve-mask procedure, one EMT ventilates the patient while the other:

- a. Suctions the patient and administers CPR
- b. Administers mouth-to-mask ventilation
- c. Inserts the oral or nasopharyngeal airway
- d. Maintains an adequate mask seal and monitors the patient for chest rise

36) You arrive on-scene for a 25-year-old female in active labor. As you arrive on-scene, a firefighter states "she is G-6 and P-4" (G= Gravidity; P=Parity). What does this mean?

- a. She has been pregnant 4 times, with 6 babies brought to full term
- b. She has been pregnant 6 times, with 4 babies brought to full term
- c. She has had 6 children, with 4 natural births
- d. She has had 6 children, with 4 C-Sections

- 37) You are treating a female patient who presents to you with AMS. She is tachycardic, hypotensive, and has deep and rapid respirations. Her skin is hot and dry to the touch. She is most likely suffering from:
 - a. Heat Cramps
 - b. Heat Exhaustion
 - c. Heat Stroke
 - d. Hypothermia
- 38) A condition in pregnant females in which the placenta is formed in an abnormal location that results in excessive pre-birth bleeding is:
 - a. Breech Presentation
 - b. Preeclampsia
 - c. Placenta Previa
 - d. Abruptio Placentae
- 39) The right ventricle pumps blood into the:
 - a. Body of the Aorta
 - b. Lungs via the Pulmonary Vein
 - c. Left Atrium
 - d. Lungs via the Pulmonary Artery
- 40) A patient should receive high-flow oxygen if he/she exhibits:
 - a. Tachycardia
 - b. Anisocoria (blown pupil)
 - c. Dehydration
 - d. Cyanosis
- 41) You have placed an IO. The correct dose of lidocaine for an adult is:
 - a. 1 mg/kg
 - b. 40 mg one time
 - c. 20 mg one time
 - d. 2 mg/kg
- 42) Your patient is complaining of chest pain. He is tachycardic, you notice JVD, and he has muffled heart sounds. The patient's pulse pressure seems to be narrowing. You suspect the patient is most likely suffering from:
 - a. Pulmonary Edema
 - b. Cardiac Tamponade
 - c. Pneumothorax
 - d. Cardiac Contusion

- 43) The correct rate of artificial ventilations for an adult patient is:
 - a. 22 ventilations per minute
 - b. 6 ventilations per minute
 - c. 18 ventilations per minute
 - d. 10 ventilations per minute
- 44) The normal tidal volume for an average-sized adult at rest is:
 - a. 250 ml
 - b. 500 ml
 - c. 750 ml
 - d. 1000 ml
- 45) 2nd Degree Thermal burns should be dressed in:
 - a. Gel-Pak Solution Wrap
 - b. Moist, sterile dressing
 - c. Left open to allow for air to assist with cooling the patient
 - d. Clean, dry sterile dressing
- 46) Your patient has suffered a brain stem injury. The patient's intracranial pressure is increasing. Which breathing pattern would you expect to see with this injury?
 - a. Tachypnea
 - b. Bradypnea
 - c. Cheyne-Stokes Breathing
 - d. Apneusis
- 47) Your patient is a 29-year-old male who has fallen off a ladder. He has bright red blood spurting profusely from a wound on his right forearm and has severe pain in his left thigh, and he appears pale, cool, and diaphoretic. Which of the following is an appropriate initial treatment for this patient?
 - a. Perform a quick initial assessment to assess his ABCs
 - b. Stop the bleeding by applying a tourniquet above the wound
 - c. Maintain an open airway and ventilate the patient with a bag-valve mask
 - d. Elevate the patient's legs to treat him for shock
- 48) Which sounds would you expect to hear from a patient with difficulty breathing due to Chronic Obstructive Pulmonary Disease?
 - a. Expiratory Rales/Crackles
 - b. Stridor
 - c. Inspiratory Rales/Crackles
 - d. Expiratory Wheezes

- 49) You arrive on-scene to find an adult female choking. Before you can intervene, she becomes unresponsive. What is your next step?
 - a. Roll the patient over and provide 5 back blows
 - b. Perform CPR, beginning with chest compressions
 - c. Attempt abdominal thrusts and ventilations via a BVM
 - d. Perform a blind finger sweep in an attempt to dislodge the object
- 50) You are presented with a patient of an apparent opioid overdose with agonal respirations and pinpoint pupils. You have just administered 2mg Narcan intra-nasally and the medication has not yet taken effect. Your next step would be to:
 - a. Stand back, the patient could wake up and become violent or vomit
 - b. Collect any evidence you or the police deem necessary
 - c. Place the patient on a non-rebreather at 15LPM
 - d. Ventilate the patient with a bag-valve mask