

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 1 of 53

1. Provider Level: EMT Reading Level: 7.3 Bloom Level: Application (Cut Score: 0.60
ID: 2656 Curriculum(s): ES: MT5, NR2011: ME20, NR2015: ME4

- A: He probably has chronic obstructive pulmonary disease.
- B: There is significant evidence he has throat/lung cancer.
- C: He should be treated like he could have a communicable disease.
- D: This patient is likely just looking for a free ride or pain medications.

This scenario is describing a patient with probable Tuberculosis. You must recognize the signs and symptoms of this communicable disease so that you can protect yourself and others.

2. Provider Level: EMT Reading Level: 8.5 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 1563 Curriculum(s): ES: MT9, NR2011: ME10, NR2015: ME7

- A: Identifying the source.
- B: Providing for rescuer safety.
- C: Wearing protective clothing.
- D: Providing high-concentration oxygen.

Providing for the safety of the rescuers is your greatest concern when dealing with inhaled poisoning cases.

3. Provider Level: EMT Reading Level: 5.7 Bloom Level: Synthesis (C Cut Score: 0.60
ID: 4112 Curriculum(s): ES: MT12, NR2011: TR4, NR2015: TR1

- A: Lay the patient flat, apply oxygen, and await the arrival of the ALS crew.
- B: Immediately apply direct pressure to the bleeding site and finish the assessment.
- C: Immediately apply a tourniquet above the shunt area and then finish the assessment.
- D: Continue with your assessment and call medical control regarding the bleeding problem.

Whenever possible personnel should avoid the handling of a dialysis shunt or fistula, but when they are bleeding, direct pressure must be applied to control the bleeding. Normal assessment and bleeding treatment should occur as in all emergency patients.

4. Provider Level: EMT Reading Level: 7.1 Bloom Level: Comprehensi Cut Score: 0.60
ID: 457 Curriculum(s): ES: MT2, MTO: 4-4-6, NR2011: CA7, NR2015: CA6

- A: Aphagia.
- B: Aphasia.
- C: Syncope.
- D: Near-syncope.

The feeling of almost passing out is referred to as near-syncope. Vertigo is when the patient feels as if he is spinning, not the room. Note: This is not actually an objective within the Basic EMT curriculum.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 2 of 53

5. Provider Level: EMT Reading Level: 11.1 Bloom Level: Knowledge (Cut Score: 0.60
ID: 1531 Curriculum(s): ES: MT11, NR2011: ME13, NR2015: ME8

- A: Leukocytes.
- B: Erythrocytes.
- C: Thrombocytes.
- D: Megakaryocytes.

The medical term for platelets is thrombocytes. Megakaryocytes are the cells that thrombocytes come from. Erythrocytes and leukocytes are red and white blood cells, respectively.

6. Provider Level: EMT Reading Level: 8.4 Bloom Level: Comprehensi Cut Score: 0.60
ID: 432 Curriculum(s): ES: MT7, MTO: 4-8-7, NR2011: ME22, NR2015: ME6

- A: Flat affect.
- B: Appears withdrawn.
- C: Relaxed and in control.
- D: Rapid speech and physical movement.

Rapid speech and rapid physical movement are indicators a patient may become violent. Relaxed and in control would be a normal presentation. A flat affect indicates the patient is withdrawn.

7. Provider Level: EMT Reading Level: 9.2 Bloom Level: Application (Cut Score: 0.60
ID: 3953 Curriculum(s): ES: MT2, NR2011: ME1, NR2015: ME1

- A: Increasing the heat in the ambulance.
- B: Offering the patient warm water to drink.
- C: Turning the lights down low in the patient area.
- D: Decreasing the temperature in the patient compartment.

Turning the lights down low is helpful as most patients with headache are also photosensitive. Making the temperature too hot or too cold is very uncomfortable. The patient should not be offered anything to eat or drink as often nausea accompanies a headache.

8. Provider Level: EMT Reading Level: 9.8 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 3480 Curriculum(s): ES: MT10, MTO: 2-1-3, NR2011: AB1, NR2015: AB2

- A: Poor skin color.
- B: Anxiety or decreased LOC.
- C: Increased respiratory rate.
- D: Increased capillary refill time.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 3 of 53

Anxiety and a decrease in the level of consciousness are the earliest signs of respiratory distress. A patient can have an adequate ventilatory status with an increased respiratory rate. Increased capillary refill times are more associated with circulatory problems. Poor skin color is a later sign of respiratory distress.

9. Provider Level: EMT Reading Level: 9.4 Bloom Level: Knowledge (Cut Score: 0.45
ID: 1464 Curriculum(s): ES: MT13, NR2011: OB4, NR2015: ME10

- A: Menses.
- B: Menarche.
- C: Mittelschmerz.
- D: Premenstrual syndrome.

Mittelschmerz is the name given for pain upon ovulation. Menarche is a female's first period. Menses is another term for menstruation.

10. Provider Level: EMT Reading Level: 9.4 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 1484 Curriculum(s): ES: MT7, NR2011: ME22, NR2015: ME6

- A: A patient on PCP.
- B: A depressed patient.
- C: A patient with a somatoform disorder.
- D: A patient with a dissociative disorder.

The patient on PCP is most likely to require restraint. The depressed patient may or may not represent a risk of harming self or others and the other two choices are not likely to represent a hazard to self or others.

11. Provider Level: EMT Reading Level: 10.8 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 3479 Curriculum(s): ES: MT10, MTO: 2-1-3, NR2011: AB1, NR2015: AB3

- A: Poor skin color.
- B: Signs of anxiety.
- C: Unequal lung sounds.
- D: Spasms of the hands and feet.

Spasms of the hands and feet would be consistent with hyperventilation syndrome. Anxiety would exist in either case. The other findings listed would indicate a significant underlying respiratory or circulatory challenge.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 4 of 53

12. Provider Level: EMT Reading Level: 9.0 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 1112 Curriculum(s): ES: MT8, MTO: 4-1-6, NR2011: CA1, NR2015: CA1

- A: You have training to assist him.
- B: There is very little risk to taking nitroglycerin.
- C: The patient will die if you do not help him take it.
- D: This is one of the medications you would carry on an ambulance.

Most EMT curriculums include education on how to assist a patient with administration of nitroglycerin. To clarify why the other options are not correct, you should remember the following. There are risks to taking nitro (hypotension) and it is not frequently carried on a basic ambulance.

13. Provider Level: EMT Reading Level: 12.0 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 492 Curriculum(s): ES: MT4, MTO: 4-5-7, NR2011: ME7, NR2015: ME3

- A: A patient with respiratory distress.
- B: A patient with hives and a runny nose.
- C: A patient with a headache and flushed skin.
- D: A patient with a history of allergies but no symptoms.

The use of an auto-injector is most appropriate for a patient with respiratory distress. The other signs and symptoms are not severe enough to warrant the use of epinephrine.

14. Provider Level: EMT Reading Level: 3.9 Bloom Level: Comprehensi Cut Score: 0.36
ID: 3930 Curriculum(s): ES: MT14

- A: Muscle infection.
- B: Lack of muscle use.
- C: Over use of a specific muscle.
- D: Prolonged pressure on specific muscle.

Over use of a muscle is the most common cause of muscle pain. Infection could cause pain but it is not very common. Lack of use would not cause pain. Pressure could eventually cause skin damage.

15. Provider Level: EMT Reading Level: 6.3 Bloom Level: Application (Cut Score: 0.90
ID: 4105 Curriculum(s): ES: MT5, NR2011: OB17, NR2015: ME4

- A: Begin a primary assessment and apply 100% oxygen.
- B: Seatbelt the child into the backseat and begin immediate transport.
- C: Take standard precautions, begin a primary assessment, and calm the parent.
- D: Begin a primary assessment, administer Tylenol, and take standard precautions.

Medical Emergencies Practice test

Taking standard precautions to protect the rescuer is a priority. Any child with a fever potentially has an infectious disease. Tylenol is not typically in the scope of practice for the EMT or EMR. Beginning your primary assessment and calming the parent must occur next. Tylenol is not typically in the scope of practice for the EMT or EMR.

16. Provider Level: EMT Reading Level: 11.0 Bloom Level: Comprehensi Cut Score: 0.60
ID: 417 Curriculum(s): ES: MT10, MTO: 4-2-5, NR2011: AB1, NR2015: AB3

- A: Supine.
- B: Fowlers.
- C: Semi-fowlers.
- D: Left-lateral recumbent.

A patient experiencing breathing distress will typically be most comfortable in a Fowler's (sitting up) position.

17. Provider Level: EMT Reading Level: 12.3 Bloom Level: Knowledge (Cut Score: 0.36
ID: 427 Curriculum(s): ES: MT7, MTO: 4-8-2, NR2011: ME22, NR2015: ME6

- A: Physical factors.
- B: Chemical factors.
- C: Reaction to stress.
- D: Mental retardation.

Mental retardation does not cause an alteration in a patient's behavior.

18. Provider Level: EMT Reading Level: 7.1 Bloom Level: Application (Cut Score: 0.45
ID: 429 Curriculum(s): ES: MT7, MTO: 4-8-4, NR2011: ME22, NR2015: ME6

- A: Sudden improvement from depression.
- B: Thought about death after seeing an autopsy.
- C: An 8-year-old who is being held back in school.
- D: Just received a job promotion he was expecting.

A sudden improvement from depression is a risk factor for suicide. 8-year-olds are not typically at risk for suicide. Receiving a promotion a patient does NOT expect is a risk factor.

19. Provider Level: EMT Reading Level: 8.1 Bloom Level: Application (Cut Score: 0.45
ID: 459 Curriculum(s): ES: MT2, MTO: 4-4-6, NR2011: ME3, NR2015: ME1

- A: Fowler's.
- B: Semi Fowler's.
- C: Prone with head down.
- D: In a lateral recumbent position.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 6 of 53

You should transport the patient with a history of syncope in a position of comfort, preferably in a lateral recumbent position to help protect their airway should they lose consciousness during transport. Note: This is not actually an objective within the Basic EMT curriculum.

20. Provider Level: EMT Reading Level: 22.3 Bloom Level: Synthesis (C) Cut Score: 0.90
ID: 4427 Curriculum(s): ES: MT2, MTO: 4-4-3, NR2011: ME2, NR2015: ME1

- A: High on drugs.
- B: Having a seizure.
- C: With pneumonia.
- D: Drunk and vomiting.

In past years, the average public did not understand a lot about seizures. To see a patient biting their tongue and foaming with a lot of secretions was very frightening. These would be the classic key signs that were reported long before signs such as unresponsiveness, spasms, color changes, vomiting, etc. Hearing this report can help you to prepare for a patient that is seizing, or one that had a seizure prior to the onset of another condition, such as stroke or cardiac arrest.

21. Provider Level: EMT Reading Level: 5.4 Bloom Level: Comprehensi Cut Score: 0.60
ID: 3919 Curriculum(s): ES: MT15, NR2011: ME19, NR2015: ME4

- A: Patient is losing consciousness.
- B: Patient may be suffering a stroke.
- C: Throat is too swollen for swallowing.
- D: There are some problems with dentures.

Throat is too swollen for swallowing. This may be due to allergic response or infection. The size of the tongue should be evaluated but with very cautious visualization as not to induce laryngospasm. Drooling is not typically related to altered mental status until the patient has lost consciousness. Drooling may be related to facial paralysis during a stroke but SOB is rare. A problem with dentures could cause drooling but not SOB.

22. Provider Level: EMT Reading Level: 9.5 Bloom Level: Application (Cut Score: 0.60
ID: 1756 Curriculum(s): ES: MT4, MTO: 4-5-2, NR2011: ME6, NR2015: ME3

- A: Assistance with administration of his Epi auto-injector.
- B: Administration of an antidote orally to counteract the reaction.
- C: Administration of oxygen via a high-concentration device.
- D: Application of a tourniquet above a possible bee sting site.

Oxygen administration will most frequently precede any other emergency care. In some cases, you may have to perform an airway maneuver and then apply oxygen. The other treatments may or may not be the correct care and are not done first.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 7 of 53

23. Provider Level: EMT Reading Level: 10.5 Bloom Level: Comprehensi Cut Score: 0.60
ID: 449 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Administering oxygen.
- B: Back boarding the patient.
- C: Providing prompt transport.
- D: Covering the patient with a blanket.

Back boarding the abdominal pain patient is neither indicated nor appropriate.

24. Provider Level: EMT Reading Level: 10.3 Bloom Level: Knowledge (Cut Score: 0.60
ID: 866 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Obesity plays a role in development of the disease.
- B: It can usually be treated with a modification in diet.
- C: It is more common than Type II diabetes.
- D: It typically has a juvenile onset.

Type I diabetes almost always requires the patient be placed on insulin. Type II diabetes is actually far more common, occurring in approximately 90% of all diabetics.

25. Provider Level: EMT Reading Level: 10.2 Bloom Level: Knowledge (Cut Score: 0.60
ID: 3572 Curriculum(s): ES: MT9, MTO: 4-6-2, NR2011: ME11, NR2015: ME7

- A: Seizures, headaches, and blurry vision.
- B: Respiratory depression, paranoia, and hypotension.
- C: Increased respirations, tachycardia, and dilated pupils.
- D: Confusion, one-sided weakness, headaches, and tachycardia.

Narcotic overdoses have varying signs and symptoms. Hypotension, respiratory depression, pupil changes, and paranoia are normal signs and symptoms.

26. Provider Level: EMT Reading Level: 11.2 Bloom Level: Comprehensi Cut Score: 0.45
ID: 2968 Curriculum(s): ES: MT3, NR2011: ME9, NR2015: ME2

- A: Melena.
- B: Hematemesis.
- C: Hematochezia.
- D: Tearing pain in the upper quadrants.

Hematochezia is bright red blood in the stool and is indicative of a lower GI bleed. The other signs and symptoms presented are associated more with upper GI bleeds. Melena could be an upper GI bleed or a slow lower GI bleed.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 8 of 53

27. Provider Level: EMT Reading Level: 13.5 Bloom Level: Analysis (Co) Cut Score: 0.60
ID: 3872 Curriculum(s): ES: MT1

- A: Observing the corner of a cabinet with blood on it and a similar mark on the patient's forehead.
- B: Determining if more help is needed at the scene.
- C: Identifying whether a scene is unsafe.
- D: Finding a bucket next to the patient's bed containing vomit.

Observing vomit in a bucket would be a clue in determining the nature of an illness. Determining if the scene is safe and if more help is needed both fall under the scene size-up portion of the assessment, but doesn't help determine nature of illness. Finding a mark on a patient's head corresponding with blood on the cabinet is an example of a mechanism of injury versus illness.

28. Provider Level: EMT Reading Level: 6.0 Bloom Level: Application (Cut Score: 0.60
ID: 4440 Curriculum(s): ES: MT12, NR2011: ME26, NR2015: ME12

- A: Infection.
- B: Viral illness.
- C: Renal failure.
- D: Allergic reaction.

The symptoms demonstrated are most commonly related to infection. Most likely the infection is at the site of the shunt as it is red and sore. This infection can spread and become a larger problem.

29. Provider Level: EMT Reading Level: 7.5 Bloom Level: Knowledge (Cut Score: 0.90
ID: 3011 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Hepatitis.
- B: Pancolitis.
- C: Pancreatitis.
- D: Cholecystitis.

Hepatitis affects the liver, cholecystitis affects the gallbladder, and pancolitis affects the entire colon.

30. Provider Level: EMT Reading Level: 6.7 Bloom Level: Comprehensi Cut Score: 0.45
ID: 1012 Curriculum(s): ES: MT8, MTO: 1-5-24, NR2011: CA1, NR2015: CA1

- A: Irregular pulse.
- B: Vomiting.
- C: Dizziness.
- D: Cyanotic skin.

Dizziness is the only symptom, a complaint of the patient that cannot be observed. The others are considered signs.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 9 of 53

31. Provider Level: EMT Reading Level: 9.1 Bloom Level: Synthesis (C) Cut Score: 0.60
ID: 4412 Curriculum(s): ES: MT5, MTO: 1-2-9, NR2011: ME20, NR2015: ME4

- A: Get immunity level checked.
- B: Get the vaccine immediately.
- C: That he has nothing to worry about.
- D: She should not ride in the ambulance for six weeks.

Chicken pox is spread through airborne droplets or contact with open vesicles. Employed EMS personnel should already know their chickenpox immunity level or have been vaccinated. A student may or may not know that information.

32. Provider Level: EMT Reading Level: 9.4 Bloom Level: Knowledge () Cut Score: 0.90
ID: 2949 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Somatic pain.
- B: Visceral pain.
- C: Referred pain.
- D: Phantom pain.

Referred pain is pain that originates in a location other than where it is felt.

33. Provider Level: EMT Reading Level: 12.0 Bloom Level: Comprehensi Cut Score: 0.45
ID: 1627 Curriculum(s): ES: MT4, NR2011: ME7, NR2015: ME3

- A: Injection.
- B: Ingestion.
- C: Inhalation.
- D: Absorption.

Injection is more likely to cause anaphylaxis than the other methods of entry because the inflammatory response is not allowed to isolate the allergen and the allergen can freely travel through the bloodstream, causing mast cells and basophils to release histamine and other substances of anaphylaxis, .

34. Provider Level: EMT Reading Level: 6.7 Bloom Level: Knowledge () Cut Score: 0.60
ID: 1566 Curriculum(s): ES: MT9, NR2011: ME10, NR2015: ME7

- A: Injection.
- B: Ingestion.
- C: Inhalation.
- D: Absorption.

Ingestion is the most common route of toxic exposure.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 10 of 53

35. Provider Level: EMT Reading Level: 9.6 Bloom Level: Comprehensi Cut Score: 0.45
ID: 1754 Curriculum(s): ES: MT8, NR2011: CA1, NR2015: CA1

- A: When chest pain is relieved with nitroglycerin or rest.
- B: When cerebral tissue perfusion is temporarily decreased.
- C: When coronary vasospasms decrease blood supply to the heart.
- D: Chest pain that results when the heart's demand for oxygen exceeds the blood supply available.

Chest pain from an MI can also be relieved with nitro or rest. Temporary cerebral perfusion decreases are called TIAs. Prinzmetal angina is a result of coronary vasospasms.

36. Provider Level: EMT Reading Level: 8.5 Bloom Level: Application (Cut Score: 0.36
ID: 1130 Curriculum(s): ES: MT9, MTO: 4-7-8, NR2011: ME17, NR2015: ME7

- A: Immobilizing the injured extremity.
- B: Treating for shock and conserving body heat.
- C: Transporting the patient in a position of comfort.
- D: Applying a pressure dressing along the entire bitten extremity.

The constricting dressing will potentially reduce the toxin absorption into the blood stream. This is done after contacting medical control. None of the other treatments are POST medical control contact. The constricting pressure dressing is the latest AHA and ARC recommendation.

37. Provider Level: EMT Reading Level: 12.0 Bloom Level: Comprehensi Cut Score: 0.60
ID: 3918 Curriculum(s): ES: MT15, NR2011: OB6, NR2015: ME4

- A: Epiglottitis.
- B: Laryngitis.
- C: Pharyngitis.
- D: Tonsillitis.

Epiglottitis should always be suspected with there is obvious infection of the throat but it is severe enough to present with drooling and inspiratory stridor. The others listed are infections of the respiratory tract but rarely would they ever cause enough soft tissue swelling to produce inspiratory stridor.

38. Provider Level: EMT Reading Level: 6.2 Bloom Level: Knowledge (Cut Score: 0.60
ID: 455 Curriculum(s): ES: MT2, NR2011: CA7, NR2015: CA4

- A: The patient cannot speak.
- B: The patient cannot swallow.
- C: The patient is weak on one side.
- D: The patient cannot feel one side.

Medical Emergencies Practice test

In aphasia the patient cannot speak. Paresis is weakness. Paresthesia is numbness. Dysphasia is difficulty in speaking. Aphagia is the inability to swallow. Note: This is not actually an objective within the Basic EMT curriculum.

39. Provider Level: EMT Reading Level: 7.3 Bloom Level: Knowledge () Cut Score: 0.90
ID: 4002 Curriculum(s): ES: MT10, NR2011: AB1, NR2015: AB3

- A: Lack of oxygen.
- B: Difficulty breathing.
- C: Tightness in the chest.
- D: Sensation of strangulation.

The term dyspnea describes trouble breathing, or labored breathing. It is a symptom the patient has and it does not always mean that there is a lack of oxygen. The presence of dyspnea is concerning and its cause must always be promptly investigated.

40. Provider Level: EMT Reading Level: 5.6 Bloom Level: Analysis (Co) Cut Score: 0.60
ID: 4107 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Stroke.
- B: Drug overdose.
- C: Low blood glucose.
- D: High blood glucose.

Any diabetic patient with altered mental status should be considered to have an imbalance in their glucose level. Slow onset of symptoms with warm, dry skin, and rapid respirations points to a problem with high blood glucose. Low blood glucose presents like a "shocky" patient. Stroke is typically rapid in onset of symptoms.

41. Provider Level: EMT Reading Level: 12.0 Bloom Level: Comprehensi) Cut Score: 0.45
ID: 822 Curriculum(s): ES: MT6, MTO: 4-4-1, NR2011: ME4, NR2015: ME5

- A: Hypoglycemia.
- B: Insulin shock.
- C: Hyperglycemia.
- D: Cerebral hypoglycemia.

Polydipsia, polyphagia, and polyuria are all related to dehydration, part of the pathophysiology of diabetes.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 12 of 53

42. Provider Level: EMT Reading Level: 7.8 Bloom Level: Analysis (Co Cut Score: 0.90
ID: 3087 Curriculum(s): ES: MT9, NR2011: ME11, NR2015: ME7

- A: Excitement, dilated pupils, and rapid heart rate.
- B: Tachypnea, dilated pupils, and excessive salivation.
- C: Depressed respirations, constricted pupils, and excited speech pattern.
- D: Depressed respirations, lowered level of consciousness, and constricted pupils.

Heroin is a narcotic, so you should expect to find depressed respirations, diminished level of consciousness, and constricted pupils.

43. Provider Level: EMT Reading Level: 8.5 Bloom Level: Knowledge (Cut Score: 0.60
ID: 362 Curriculum(s): ES: MT2, MTO: 3-2-2, NR2011: ME3, NR2015: ME1

- A: ABC.
- B: AVPU.
- C: OPQRST.
- D: DCAP-BTLS.

Alert, Verbal, Pain, and Unresponsive-AVPU.

44. Provider Level: EMT Reading Level: 17.4 Bloom Level: Knowledge (Cut Score: 0.90
ID: 2649 Curriculum(s): ES: MT5

- A: 50%.
- B: 65%.
- C: 75%.
- D: 90%.

This percentage is thought to be higher in children.

45. Provider Level: EMT Reading Level: 7.9 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 1707 Curriculum(s): ES: MT8, MTO: 1-6-13, NR2011: CA1, NR2015: CA1

- A: Have him walk downstairs with assistance from the rescuers.
- B: Make the patient walk on his own to assess his condition.
- C: Carry him down the stairs on a backboard or portable stretcher.
- D: Move the patient to a stair chair and carry him downstairs.

Caring for him as though he is having a heart attack even when you suspect he is probably not is the best plan. He will not likely tolerate lying down with chest pain and he should not be walking. Exerting himself could worsen his condition.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 13 of 53

46. Provider Level: EMT Reading Level: 7.4 Bloom Level: Knowledge (Cut Score: 0.60
ID: 4414 Curriculum(s): ES: MT6, MTO: 4-4-1, NR2011: ME4, NR2015: ME5

- A: Diabetes.
- B: Ketoacidosis.
- C: Hypoglycemia.
- D: Adrenal gland disorders.

Diabetes is very prevalent in the United States and is the leading endocrine disorder. Over 9% of the population has diagnosed diabetes and another 27% are undiagnosed.

47. Provider Level: EMT Reading Level: 7.1 Bloom Level: Analysis (Co Cut Score: 0.90
ID: 4102 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Constipation and fever.
- B: Infection of the GI tract.
- C: Bowel obstruction and shock.
- D: Impending onset of hyperglycemia.

Pale, sweaty skin with rapid pulse and respirations paint the picture of early shock. Elderly patients are susceptible to bowel obstructions that can lead to shock. The cause of these altered vital signs should be investigated in the emergency department.

48. Provider Level: EMT Reading Level: 9.1 Bloom Level: Comprehensi Cut Score: 0.60
ID: 1467 Curriculum(s): ES: MT13, NR2011: OB4, NR2015: ME10

- A: Dusting and cleaning.
- B: Dilation and curettage.
- C: Dyspareunia and coitus.
- D: Dysmenorrhea and cervicalitis.

The medical term represented by D&C is dilation and curettage. The term often is mentioned as dusting and cleaning.

49. Provider Level: EMT Reading Level: 7.3 Bloom Level: Application (Cut Score: 0.45
ID: 3474 Curriculum(s): ES: MT10, MTO: 2-1-24, NR2011: AB4, NR2015: AB7

- A: Assisting ventilations with a bag-valve-mask.
- B: Assisting the patient with his oral medication.
- C: Increasing the liter flow of the nasal cannula to 4 lpm.
- D: Switching the patient to a non-rebreather at 10 to 15 lpm.

The patient is showing signs of severe respiratory distress and should have his oxygen increased to a high concentration. You should also be prepared to assist ventilations if the patient should decompensate. Oral medication will not be effective in a timely manner. Assisting ventilations at this point is too aggressive.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 14 of 53

50. Provider Level: EMT Reading Level: 9.4 Bloom Level: Knowledge (Cut Score: 0.45
ID: 420 Curriculum(s): ES: MT10, MTO: 4-2-8, NR2011: AB4, NR2015: AB7

- A: Dilates the bronchi.
- B: Dilates the bronchioles.
- C: Reduces swelling in the airway.
- D: Decreases secretions in the airway.

Albuterol is a beta-2 agonist and its primary action is to dilate the bronchioles. It does not affect the bronchi and has minimal effect on swelling and mucous production.

51. Provider Level: EMT Reading Level: 6.3 Bloom Level: Evaluation (C Cut Score: 0.60
ID: 4420 Curriculum(s): ES: MT9, MTO: 4-3-1, NR2011: CA1, NR2015: CA1

- A: The patient will relax.
- B: His breathing will slow.
- C: Reduced cardiac output.
- D: Increased blood pressure.

When the heart rate slows in a patient such as the one described here, it is most likely going to affect the cardiac output, which will be noticeable in the signs of perfusion. The respiratory rate will elevate in an attempt to bring in more oxygen and the chest pain may increase.

52. Provider Level: EMT Reading Level: 9.5 Bloom Level: Synthesis (C Cut Score: 0.60
ID: 4417 Curriculum(s): ES: MT7, MTO: 4-8-2, NR2011: ME22, NR2015: ME6

- A: Alcohol.
- B: Hypoxia.
- C: Infection.
- D: Electrolyte imbalance.

Alcohol is the most common cause of behavioral disturbances. Alcohol mixed with drugs is also seen. EMS personnel must rule out other causes of behavior emergencies such as hypoglycemia, stroke, hypoxia, head trauma, etc.

53. Provider Level: EMT Reading Level: 9.0 Bloom Level: Knowledge (Cut Score: 0.90
ID: 4003 Curriculum(s): ES: MT10, NR2011: AB1, NR2015: AB2

- A: Hypoxemia.
- B: Ischemia.
- C: Infarction.
- D: Hypercarbia.

The medical term for reduced oxygen in the blood is hypoxemia.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 15 of 53

54. Provider Level: EMT Reading Level: 10.8 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 396 Curriculum(s): ES: MT2, MTO: 3-4-3, NR2011: ME3, NR2015: ME1

- A: A rapid secondary assessment (rapid physical survey).
- B: A complete secondary assessment (detailed exam).
- C: A modified secondary assessment (focused exam).
- D: Delay any further assessment and transport.

You should perform a rapid secondary assessment to attempt to identify any additional life threats.

55. Provider Level: EMT Reading Level: 6.0 Bloom Level: Knowledge (Cut Score: 0.60
ID: 4429 Curriculum(s): ES: MT3, NR2011: ME9, NR2015: ME2

- A: Ingested a toxin.
- B: A kidney or liver problem.
- C: Ingested too much alcohol.
- D: An ulceration in the upper GI tract.

An ulceration anywhere along the upper GI system can produce bleeding that will show in vomit. If the bleeding is in the lower GI system, blood can show, or it usually will make the stool black in color.

56. Provider Level: EMT Reading Level: 9.6 Bloom Level: Analysis (Co Cut Score: 0.90
ID: 2860 Curriculum(s): ES: MT2, NR2011: CA7, NR2015: CA4

- A: Embolic stroke.
- B: Thrombotic stroke.
- C: Transient ischemic attack.
- D: Intracerebral hemorrhage.

As the symptoms are resolving, this is MOST likely a TIA, but the other choices cannot be ruled out without further evaluation at the hospital.

57. Provider Level: EMT Reading Level: 9.4 Bloom Level: Application (Cut Score: 0.60
ID: 3536 Curriculum(s): ES: MT3, MTO: 6-1-3, NR2011: ME8, NR2015: ME2

- A: Palpating the abdomen.
- B: Percussing the abdomen.
- C: Listening for bowel sounds.
- D: Checking for rebound tenderness.

Of the assessment methods listed, palpating the abdomen is the most appropriate. Percussing the abdomen is tapping to check for air or fluid in the belly.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 16 of 53

58. Provider Level: EMT Reading Level: 6.7 Bloom Level: Comprehensi Cut Score: 0.90
ID: 4407 Curriculum(s): ES: MT4, MTO: 1-4-2, NR2011: ME6, NR2015: ME3

- A: The liver.
- B: Hormones.
- C: Adrenal glands.
- D: White blood cells.

Along with other blood components, white blood cells play a major role in the body's immune response.

59. Provider Level: EMT Reading Level: 12.0 Bloom Level: Comprehensi Cut Score: 0.60
ID: 434 Curriculum(s): ES: MT7, MTO: 4-8-9, NR2011: ME22, NR2015: ME6

- A: We may make a borderline patient suicidal.
- B: Treating the patient in a hurry can make the situations worse.
- C: You need to take time so that the hospital can prepare for the patient.
- D: The underlying cause of behavioral emergencies is psychological.

Treating the patient in a hurry will make the situation worse. The other choices are either irrelevant or incorrect.

60. Provider Level: EMT Reading Level: 6.6 Bloom Level: Synthesis (C Cut Score: 0.60
ID: 4447 Curriculum(s): ES: MT13, MTO: 4-9-18, NR2011: OB4, NR2015: ME10

- A: Abortion.
- B: Hypovolemia.
- C: Hypothermia.
- D: Pelvic Inflammatory Disease.

A young woman found in hypovolemic shock needs urgent care. Oxygen, positioning, warming and fluid replacement are indicated. Severe vaginal bleeding is most often caused by incomplete abortion.

61. Provider Level: EMT Reading Level: 12.0 Bloom Level: Application (Cut Score: 0.90
ID: 1935 Curriculum(s): ES: MT7, NR2011: ME22, NR2015: ME6

- A: Obtaining vital signs should be done immediately.
- B: Assessing the mental status of the patient should be done first.
- C: You should stand above the patient to gain a position of authority.
- D: Rapid assessment and treatment are critical in this patient population.

You should first assess the mental status of this patient to determine if it is safe to approach. After you have established a rapport, you can then invade his space and obtain vital signs. You should spend time with this patient and standing above the patient is only performed if necessary.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 17 of 53

62. Provider Level: EMT Reading Level: 6.7 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 4098 Curriculum(s): ES: MT1, NR2011: AB4, NR2015: AB7

- A: Asthma.
- B: Chronic bronchitis.
- C: Emphysema.
- D: Pneumonia.

Asthma is characterized by secretions, spasm and swelling of the airways. Emphysema and chronic bronchitis do produce a lot of secretions but rarely have the problems with spasm and swelling of the airways. Pneumonia would present with a fever.

63. Provider Level: EMT Reading Level: 9.5 Bloom Level: Application (Cut Score: 0.45
ID: 960 Curriculum(s): ES: MT2, MTO: 4-4-3, NR2011: CA7, NR2015: CA4

- A: Recovery position.
- B: Supine position.
- C: Fowler's position.
- D: Trendelenburg position.

The recovery position offers the most protection against potential aspiration of vomitus or secretions.

64. Provider Level: EMT Reading Level: 6.9 Bloom Level: Knowledge (Cut Score: 0.45
ID: 2835 Curriculum(s): ES: MT2, NR2011: ME2, NR2015: ME1

- A: A loss of consciousness from idiopathic causes.
- B: The alternating contraction and relaxation of muscles.
- C: A temporary alteration in behavior due to a massive electrical discharge in the brain.
- D: A change in behavior due to an electrolyte imbalance within a group of neurons in the brain.

Seizures can be caused by other than idiopathic or electrolyte causes. The alternating contraction and relaxation of muscles describes one type of seizure.

65. Provider Level: EMT Reading Level: 10.6 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 1630 Curriculum(s): ES: MT4, NR2011: ME6, NR2015: ME3

- A: Wear a Medic Alert bracelet.
- B: Recognize and avoid that food.
- C: Carry an epinephrine auto-injector.
- D: Consult a physician about desensitization.

Prevention is always the best treatment.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 18 of 53

66. Provider Level: EMT Reading Level: 5.8 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 956 Curriculum(s): ES: MT12, NR2011: ME8, NR2015: ME9

- A: Acute renal failure.
- B: Chronic renal failure.
- C: Renal calculi.
- D: Urinary tract infection.

Initially the pain starts as vague and within 30-60 minutes progresses to an extremely sharp pain that may stay in the flank or migrate lower.

67. Provider Level: EMT Reading Level: 12.0 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 2202 Curriculum(s): ES: MT10, NR2011: AB1, NR2015: AB3

- A: Pulse rate.
- B: Lung sounds.
- C: Pulse oximetry.
- D: Blood pressure.

Though you might expect changes in the other signs, an assessment of lung sounds would be your highest priority as lung sounds are an assessment of airway. If they are wet or unequal it will lead you in a different direction than if they are clear and equal.

68. Provider Level: EMT Reading Level: 9.5 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 2201 Curriculum(s): ES: MT2, NR2011: CA7, NR2015: CA4

- A: Drug reaction.
- B: Hypoglycemia.
- C: Alcohol overdose.
- D: Cerebrovascular accident.

The two choices that should be highest on your list are hypoglycemia and CVA as they have the greatest potential negative outcome. Between these two, hypoglycemia should be ruled in or out first, as it is a significant life threat and it is also something you can easily correct.

69. Provider Level: EMT Reading Level: 10.0 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 3916 Curriculum(s): ES: MT15, NR2011: TR5, NR2015: TR1

- A: Blood pressure.
- B: History.
- C: Pulse.
- D: Skin color.

History is very important to determine why the patient has a nosebleed. Ruling out trauma, nasal congestion, or medical conditions is necessary. Skin color, BP and Pulse all tell you how the nosebleed is affecting the patient.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 19 of 53

70. Provider Level: EMT Reading Level: 7.9 Bloom Level: Application (Cut Score: 0.45
ID: 1770 Curriculum(s): ES: MT2, NR2011: CA7, NR2015: CA4

- A: Have him sit up straight to improve circulation to the head.
- B: Continue talking and reassuring the patient.
- C: Move the patient to a couch or recliner.
- D: Check his pulse oximetry reading.

Talking and reassuring the patient will help alleviate the stress of this medical problem. Moving him to a recliner or having him sit up will not necessarily benefit the patient.

71. Provider Level: EMT Reading Level: 12.0 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 488 Curriculum(s): ES: MT4, MTO: 4-5-4, NR2011: ME6, NR2015: ME3

- A: A slow development of signs and symptoms after a first exposure.
- B: A second exposure after a previous reactive incident where the body formed antibodies.
- C: The first time a person is exposed he has hives, itchy eyes, and a runny nose.
- D: A development of diarrhea two days after eating a substance the patient was allergic to.

The more rapid the reaction and especially where antibodies were formed after a previous incident would lead you to suspect a more severe reaction.

72. Provider Level: EMT Reading Level: 7.1 Bloom Level: Knowledge (Cut Score: 0.60
ID: 1536 Curriculum(s): ES: MT11, NR2011: ME13, NR2015: ME8

- A: Leukocytes.
- B: Erythrocytes.
- C: Lymphocytes.
- D: Thrombocytes.

Leukoctye is the name for a white blood cell. Erythrocytes are red blood cells and thrombocytes are platelets. Lymphocytes are a type of white blood cell.

73. Provider Level: EMT Reading Level: 5.2 Bloom Level: Evaluation (C Cut Score: 0.45
ID: 4452 Curriculum(s): ES: MT14, MTO: 5-3-4, NR2011: TR10, NR2015: TR6

- A: Chronic sprain.
- B: Stress fracture.
- C: Simple arthritis.
- D: Non-traumatic inflammation.

Since the patient has had this pain for four weeks, it most likely is an inflammation that is increasing with exercise such as plantar fasciitis. This condition very commonly causes pain on the bottom of the foot. Stress fracture and sprain are often acute in onset and related to high impact sports.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 20 of 53

74. Provider Level: EMT Reading Level: 12.0 Bloom Level: Knowledge (Cut Score: 0.90
ID: 2140 Curriculum(s): ES: MT11

- A: Albumin.
- B: Platelets.
- C: Red blood cells.
- D: White blood cells.

Albumin helps maintain volume, platelets control bleeding, and red blood cells carry oxygen.

75. Provider Level: EMT Reading Level: 10.1 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 3874 Curriculum(s): ES: MT1

- A: Grip strength.
- B: Skeletal integrity.
- C: Pulse comparison.
- D: Lung sound equality.

Skeletal integrity would be the least critically important assessment with a medical patient. Lung sound equality or inequality could be used to differentiate a spontaneous pneumothorax or pneumonia versus CHF.

76. Provider Level: EMT Reading Level: 9.5 Bloom Level: Comprehensi Cut Score: 0.60
ID: 1191 Curriculum(s): ES: MT8, MTO: 4-3-42, NR2011: CA1, NR2015: CA1

- A: Heart rate of 100.
- B: Respirations of 20.
- C: Blood pressure of 88/42.
- D: Complaint of nausea.

You may not assist a patient with nitroglycerin if she is hypotensive. This medicine can cause her blood pressure to drop further. Nitro is also contraindicated in cases of severe bradycardia (<60) or tachycardia (>100). Nausea is not an absolute contraindications but could be a consideration when deciding to assist a patient with nitroglycerin.

77. Provider Level: EMT Reading Level: 9.5 Bloom Level: Application (Cut Score: 0.60
ID: 486 Curriculum(s): ES: MT4, MTO: 4-5-2, NR2011: ME7, NR2015: ME3

- A: Administering activated charcoal.
- B: Assisting the patient's ventilations.
- C: Clearing the airway with abdominal thrusts.
- D: Administering epinephrine by way of auto-injector.

Our most important intervention should be to administer epinephrine if available as this patient is having a severe allergic reaction.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 21 of 53

78. Provider Level: EMT Reading Level: 7.9 Bloom Level: Synthesis (C) Cut Score: 0.90
ID: 419 Curriculum(s): ES: MT10, MTO: 4-2-7, NR2011: AB1, NR2015: AB3

- A: Adequate.
- B: Inadequate.
- C: Respiratory failure.
- D: Respiratory distress.

An adequate rate, volume, and good color all indicate adequate breathing.

79. Provider Level: EMT Reading Level: 12.0 Bloom Level: Knowledge () Cut Score: 0.45
ID: 817 Curriculum(s): ES: MT4, NR2011: ME7, NR2015: ME3

- A: 1-2 hours.
- B: 30-45 minutes.
- C: 30-60 seconds.
- D: Less than 30 seconds.

This speed of onset is also indicative of the severity of the attack.

80. Provider Level: EMT Reading Level: 5.9 Bloom Level: Analysis (Co) Cut Score: 0.90
ID: 4100 Curriculum(s): ES: MT1, NR2011: ME2, NR2015: ME1

- A: Having a stroke.
- B: Having a heart attack.
- C: Going into hypoglycemia.
- D: Recovering from a seizure.

Patient's found unresponsive without mechanism of injury, obvious signs of intoxication, or signs of hypoglycemia should be suspected of being post-seizure. The post-seizure period (postictal) lasts different periods of time for different patients.

81. Provider Level: EMT Reading Level: 10.9 Bloom Level: Comprehensi Cut Score: 0.45
ID: 3952 Curriculum(s): ES: MT2, NR2011: ME3, NR2015: ME1

- A: Circulatory.
- B: Nervous.
- C: Respiratory.
- D: Renal.

The local and systemic nervous systems must be evaluated when there is loss of feeling or loss of function as this is most likely where the cause originates. The respiratory, circulatory, or renal systems most likely are not at fault with these types of symptoms.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 22 of 53

82. Provider Level: EMT Reading Level: 9.1 Bloom Level: Analysis (Co) Cut Score: 0.60
ID: 4446 Curriculum(s): ES: MT13, MTO: 4-9-18, NR2011: OB4, NR2015: ME10

- A: Ovarian cyst.
- B: Ovarian rupture.
- C: Vaginal yeast infection.
- D: Pelvic inflammatory disease.

Pelvic inflammatory disease (PID) typically presents with lower abdominal pain. PID may be accompanied by fever, chills, and vaginal discharge. It can be mild or severe and further complicated by bacteria traveling through the blood to other abdominal organs, especially the liver.

83. Provider Level: EMT Reading Level: 7.9 Bloom Level: Comprehensi Cut Score: 0.36
ID: 1581 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Somatic/parietal pain located in solid structures.
- B: Referred pain located in solid structures.
- C: Visceral pain located in hollow structures.
- D: Somatic/parietal pain located in hollow structures.

Visceral pain is usually poorly localized and associated with hollow organs. Somatic/parietal pain is usually sharp and well localized. Referred pain is pain sensed somewhere other than the site of origination.

84. Provider Level: EMT Reading Level: 9.6 Bloom Level: Comprehensi Cut Score: 0.60
ID: 1703 Curriculum(s): ES: MT2, NR2011: ME3, NR2015: ME1

- A: Anger.
- B: Denial.
- C: Frustration.
- D: Disorientation.

Disorientation would be the most expected feeling the patient would experience. Anger, denial, and frustration would not be as common.

85. Provider Level: EMT Reading Level: 5.8 Bloom Level: Knowledge (Cut Score: 0.60
ID: 780 Curriculum(s): ES: MT2, NR2011: ME2, NR2015: ME1

- A: Simple partial seizure.
- B: Complex partial seizure.
- C: Grand mal seizure.
- D: Petit mal seizure.

A petit mal seizure is characterized by a 10 to 30-second loss of consciousness or loss of contact with surroundings.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 23 of 53

86. Provider Level: EMT Reading Level: 11.1 Bloom Level: Comprehensi Cut Score: 0.60
ID: 1118 Curriculum(s): ES: MT2, MTO: 4-4-3, NR2011: ME3, NR2015: ME1

- A: Administrating of instant glucose.
- B: Maintaining an open, patent airway.
- C: Assessing for any traumatic injuries.
- D: Contacting medical control authority.

Airway management should always be your HIGHEST priority after assuring the scene is safe and considering whether immobilizing the head is necessary.

87. Provider Level: EMT Reading Level: 5.6 Bloom Level: Knowledge (Cut Score: 0.60
ID: 444 Curriculum(s): ES: MT9, MTO: 4-6-2, NR2011: ME11, NR2015: ME7

- A: Cocaine.
- B: Codeine.
- C: Methamphetamine.
- D: PCP (angel dust).

Codeine is a narcotic. Cocaine and meth are uppers and PCP is a hallucinogen.

88. Provider Level: EMT Reading Level: 5.8 Bloom Level: Application (Cut Score: 0.90
ID: 4114 Curriculum(s): ES: MT13, NR2011: OB4, NR2015: ME10

- A: Walking the patient around to see if that will relieve the pain.
- B: Encouraging the patient to take a pain reliever and see if that helps.
- C: Positioning the patient supine on a backboard and administering oxygen.
- D: Allowing the patient to assume a position of comfort and administer oxygen.

With abdominal pain it is best to allow the patient a position of comfort as long as their head can be lowered so they are horizontal. Oxygen should be administered in case there is a risk for shock.

89. Provider Level: EMT Reading Level: 6.1 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 4453 Curriculum(s): ES: MT15, MTO: 5-2-7, NR2011: OB13, NR2015: TR6

- A: Lay the child down to prevent shock.
- B: Hold pressure on both sides of the nose.
- C: Continue with the ice bag under the nose.
- D: Place them on the side so blood is not swallowed.

The correct treatment is to hold pressure on both sides of the nose, just at the base of the bony bridge. The child should be kept sitting up, slightly leaning forward so the blood does not go backwards down the throat.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 24 of 53

90. Provider Level: EMT Reading Level: 6.4 Bloom Level: Comprehensi Cut Score: 0.45
ID: 889 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Tachycardia.
- B: Diaphoresis.
- C: Flushed skin.
- D: Pale skin.

Flushed skin is more commonly found in hyperglycemia.

91. Provider Level: EMT Reading Level: 6.2 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 3981 Curriculum(s): ES: MT7, NR2011: ME22, NR2015: ME6

- A: Identifying if drug use is involved.
- B: Ask her what she used to cut her wrists.
- C: Asking if she recently broke up with a boyfriend.
- D: Questioning the relationship between parent and child.

Use of toxic substances can often create disturbances in perception and body sensations, which may contribute to a patient hurting herself. Questioning how this was done is not as important in the short-term treatment of this patient. This patient must be transported so social and mental health professionals can care for her.

92. Provider Level: EMT Reading Level: 11.5 Bloom Level: Analysis (Co Cut Score: 0.36
ID: 1550 Curriculum(s): ES: MT11, NR2011: ME13, NR2015: ME8

- A: Polycythemia.
- B: Thrombocytosis.
- C: Sickle cell disease.
- D: Multiple myeloma.

The symptoms described in this situation are the expected findings of a patient with Sickle Cell Crisis. Many, but not all, of the provided symptoms could also occur in the other disorders listed.

93. Provider Level: EMT Reading Level: 8.3 Bloom Level: Comprehensi Cut Score: 0.45
ID: 4001 Curriculum(s): ES: MT10, NR2011: AB1, NR2015: AB3

- A: Hypoxia.
- B: Hypocarbica.
- C: Hyperventilation.
- D: Peripheral ischemia.

When a patient has trouble breathing, or dyspnea, we are concerned that they may not be getting enough oxygen into the body, which can produce hypoxia. The reduction of oxygen to the brain and the heart is critical.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 25 of 53

94. Provider Level: EMT Reading Level: 12.0 Bloom Level: Knowledge (Cut Score: 0.90
ID: 454 Curriculum(s): ES: MT2, MTO: 4-4-6, NR2011: CA7, NR2015: CA4

- A: Transient ischemic attack.
- B: Hemorrhagic stroke.
- C: Thrombotic stroke.
- D: Embolic stroke.

When signs and symptoms of a cerebral vascular accident resolve within 4 hours, the condition is referred to as a transient ischemic attack (TIA). Note: This is not actually an objective within the Basic EMT curriculum.

95. Provider Level: EMT Reading Level: 7.5 Bloom Level: Application (Cut Score: 0.60
ID: 485 Curriculum(s): ES: MT4, MTO: 4-5-1, NR2011: ME6, NR2015: ME3

- A: Inhalation poisoning.
- B: Mild allergic reaction.
- C: Anaphylactic reaction.
- D: Severe allergic reaction.

With normal vital signs and no difficulty breathing, this patient would best be described as having a mild allergic reaction.

96. Provider Level: EMT Reading Level: 7.4 Bloom Level: Application (Cut Score: 0.60
ID: 3538 Curriculum(s): ES: MT3, MTO: 6-1-18, NR2011: ME8, NR2015: ME2

- A: Place the child in a left-lateral recumbent position.
- B: Place the child on a non-rebreather mask at 10-15 lpm.
- C: Place the child in a shock position with the knees flexed.
- D: Place the child in a supine position with the feet elevated.

The child should be placed in a left-lateral recumbent position to protect the airway and to provide comfort. The other options can all negatively impact the child's airway.

97. Provider Level: EMT Reading Level: 12.0 Bloom Level: Comprehensi Cut Score: 0.60
ID: 912 Curriculum(s): ES: MT4, NR2011: ME7, NR2015: ME3

- A: Urticaria.
- B: Wheezing.
- C: Pruritus.
- D: Hypotension.

Low blood pressure is far more serious in anaphylaxis than itching, hives, or wheezing.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 26 of 53

98. Provider Level: EMT Reading Level: 8.0 Bloom Level: Knowledge (Cut Score: 0.60
ID: 814 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Appendicitis.
- B: Peptic ulcer disease.
- C: Gastroenteritis.
- D: Cholecystitis.

Cholecystitis would be the term used for inflammation of the gallbladder.

99. Provider Level: EMT Reading Level: 10.5 Bloom Level: Comprehensi Cut Score: 0.90
ID: 433 Curriculum(s): ES: MT7, MTO: 4-8-8, NR2011: ME22, NR2015: ME6

- A: Take your time and listen to him.
- B: Try to interview the patient by yourself.
- C: Get close and touch the shoulder to show you care.
- D: If he is having hallucinations, state you see them as well.

Taking your time and listening to the patient will go a long way toward calming the behavioral emergent patient. The other suggestions either put you at risk or are inappropriate.

100. Provider Level: EMT Reading Level: 9.1 Bloom Level: Comprehensi Cut Score: 0.45
ID: 834 Curriculum(s): ES: MT9, MTO: 4-6-3, NR2011: ME10, NR2015: ME7

- A: The stomach.
- B: The brain.
- C: The small intestine.
- D: The liver.

The ultimate goal is to prevent absorption of any toxin. Absorption occurs primarily in the small intestine.

101. Provider Level: EMT Reading Level: 10.4 Bloom Level: Comprehensi Cut Score: 0.90
ID: 3942 Curriculum(s): ES: MT12, NR2011: TR6, NR2015: TR5

- A: Very vascular.
- B: Prone to infection.
- C: Very slow to heal.
- D: Limited in blood supply.

Very vascular, which means trauma may cause an ease of bleeding and hemorrhage. There may be an increase risk of infection to open wounds if the area is not kept clean.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 27 of 53

102. Provider Level: EMT Reading Level: 10.0 Bloom Level: Knowledge (Cut Score: 0.90
ID: 3075 Curriculum(s): ES: MT9, NR2011: ME10, NR2015: ME7

- A: Poisoning by mouth.
- B: Poisoning by needle injection.
- C: Poisoning by breathing poisons.
- D: Poisoning by absorption through the skin.

Ingested poisons are taken into the body orally.

103. Provider Level: EMT Reading Level: 9.0 Bloom Level: Comprehensi Cut Score: 0.45
ID: 435 Curriculum(s): ES: MT9, MTO: 4-6-1, NR2011: ME10, NR2015: ME7

- A: Inhaled.
- B: Injected.
- C: Ingested.
- D: Absorbed.

The most expected route for an accidental petroleum poisoning would be ingestion, typically as a result of a siphoning experience gone bad.

104. Provider Level: EMT Reading Level: 8.6 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 395 Curriculum(s): ES: MT3, MTO: 3-4-2, NR2011: ME8, NR2015: ME9

- A: Performing a rapid medical assessment.
- B: Doing a DCAP-BTLS assessment of the affected area.
- C: Asking him about his current medications and allergies.
- D: Asking him to compare this pain to the last time he had it.

Comparing this pain to the last time he had it will tell you if this is a repeat of the same condition or possibly something new.

105. Provider Level: EMT Reading Level: 12.0 Bloom Level: Analysis (Co Cut Score: 0.36
ID: 443 Curriculum(s): ES: MT9, MTO: 4-6-9, NR2011: ME10, NR2015: ME7

- A: So the hospital can give you information regarding the expected effects of the poison.
- B: The hospital will need additional time to prepare for a poisoning or overdose patient.
- C: Some substances can be minimized or neutralized with common household substances.
- D: So the hospital can acquire the antidote in a timely fashion so that it is available when you arrive.

Some substances can be minimized or neutralized by common household substances. Also, early intervention can minimize the effects of the poison.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 28 of 53

106. Provider Level: EMT Reading Level: 7.8 Bloom Level: Analysis (Co) Cut Score: 0.45
ID: 453 Curriculum(s): ES: MT2, NR2011: ME2, NR2015: ME1

- A: "The child had a temperature of 104 prior to the seizure."
- B: "The child urinated and defecated himself during the seizure."
- C: "He has stopped and started seizing three times in a row now."
- D: "He has not been taking his seizure medication like he is supposed to."

The stopping and staring of the seizure three times in a row indicates status epilepticus, which is a serious medical emergency. Note: This is not actually an objective within the Basic EMT curriculum but is a part of the Educational Standards and National Registry job practice.

107. Provider Level: EMT Reading Level: 7.6 Bloom Level: Analysis (Co) Cut Score: 0.45
ID: 4450 Curriculum(s): ES: MT14, MTO: 5-4-6, NR2011: TR10, NR2015: TR6

- A: Fibromyalgia.
- B: Osteoarthritis.
- C: Multiple Sclerosis.
- D: Muscular Dystrophy.

Osteoarthritis is commonly responsible for degeneration of joints. Bony changes can put pressure on nerves and muscles that will produce various forms of pain. The other conditions listed are generally related to muscle conditions.

108. Provider Level: EMT Reading Level: 10.2 Bloom Level: Comprehensi Cut Score: 0.90
ID: 425 Curriculum(s): ES: MT10, MTO: 4-2-12, NR2011: AB4, NR2015: AB7

- A: To calm and reassure the patient.
- B: To increase the patient's heart rate.
- C: To provide immediate bronchodilation.
- D: To decrease upper and lower airway secretions.

We administer an inhaler to provide for immediate bronchodilation. An inhaler will usually cause anxiety. And an increase in the patient's heart rate is not desirable. Inhalers usually have no effect on secretions.

109. Provider Level: EMT Reading Level: 7.6 Bloom Level: Comprehensi Cut Score: 0.60
ID: 3870 Curriculum(s): ES: MT1

- A: Vital signs.
- B: Patient age.
- C: Chief complaint.
- D: Dispatch information.

The patient's chief complaint should guide the focus of your assessment, at least initially. If during your assessment you find other more life-threatening issues, your focus should then change.

Medical Emergencies Practice test

Medical Emergencies Practice

Annotated Answer Key

9/11/2019 12:48:29 PM

Rob Clawson

Page 29 of 53

110. Provider Level: EMT Reading Level: 8.3 Bloom Level: Comprehensi Cut Score: 0.45
ID: 4445 Curriculum(s): ES: MT13, MTO: 4-9-18, NR2011: OB4, NR2015: ME10

- A: An imbalance in the normal bacteria.
- B: Lack of good personal hygiene.
- C: Lack of the proper nutrients.
- D: Spread of colon bacteria.

The overgrowth of Candida anywhere in the body can cause a yeast infection. This is an imbalance of the normal bacteria present.

111. Provider Level: EMT Reading Level: 6.6 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 3982 Curriculum(s): ES: MT7, NR2011: ME22, NR2015: ME6

- A: Was he recently fired from work?
- B: Was there a recent fight with a significant other?
- C: Has the patient ever had a mental health exam?
- D: Did a medical cause bring on this behavioral disturbance?

The influence of substance abuse or other medical emergencies must always be considered when there is an abrupt onset to a behavioral emergency. A “psychotic break” can always come about abruptly. The role for EMS is to rule out life-threatening conditions, restrain the patient safely and transport to the appropriate hospital for further evaluation and treatment.

112. Provider Level: EMT Reading Level: 7.5 Bloom Level: Application (Cut Score: 0.60
ID: 4442 Curriculum(s): ES: MT12, NR2011: ME8, NR2015: ME9

- A: Dehydration.
- B: Muscle spasm.
- C: Kidney stones.
- D: Bladder infection.

Flank pain with associated radiation to the genital area is a classic symptom of kidney stones. A lack of adequate hydration is a leading cause of kidney stones.

113. Provider Level: EMT Reading Level: 7.0 Bloom Level: Knowledge (Cut Score: 0.90
ID: 4438 Curriculum(s): ES: MT12, MTO: 5-1-1, NR2011: ME26, NR2015: ME12

- A: That arm.
- B: The left leg.
- C: The right leg.
- D: The other arm.

Blood pressure should not be taken in the arm with a shunt as it may cause excessive pressure at the shunt site leading to bleeding.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 30 of 53

114. Provider Level: EMT Reading Level: 8.7 Bloom Level: Application (Cut Score: 0.45
ID: 941 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Hyperglycemia.
- B: Diabetic ketoacidosis.
- C: Hypoglycemia.
- D: Diabetic coma.

The assessment findings above indicate classic presentation of hypoglycemia.

115. Provider Level: EMT Reading Level: 6.0 Bloom Level: Comprehensi Cut Score: 0.45
ID: 1657 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Blood glucose level increases.
- B: Brain is unable to receive glucose.
- C: Body retains fluid to keep homeostasis.
- D: Pancreas releases glucagon to increase glucose levels.

When the insulin levels fall, glucose will no longer be able to enter the body's cells (note the brain does not require insulin to facilitate transfer of glucose into the cells) and the glucose levels will increase. Because of the increase in glucose levels, the person will begin to dump sugar from the kidneys and therefore dump water as well.

116. Provider Level: EMT Reading Level: 10.2 Bloom Level: Comprehensi Cut Score: 0.45
ID: 3082 Curriculum(s): ES: MT9, NR2011: ME10, NR2015: ME7

- A: SLUDGE.
- B: Blurred vision, nausea, and vomiting.
- C: Headache, nausea, vertigo, and weakness.
- D: Increased respiratory drive, euphoria, and loss of consciousness.

Carbon monoxide will actually cause a depression in the respiratory drive.

117. Provider Level: EMT Reading Level: 10.4 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 1755 Curriculum(s): ES: MT2, MTO: 3-7-7, NR2011: ME3, NR2015: ME1

- A: I started feeling dizzy a couple of minutes ago.
- B: I am going to have a seizure in a few minutes.
- C: I have a tearing sensation in my abdomen radiating to my back.
- D: I fell a couple of days ago and I think I may have broken my leg.

Most patients describing a medical problem will complain of a general symptom. Specific clinical references or explanations of a traumatic event are not the most common way of describing medical problems.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 31 of 53

118. Provider Level: EMT Reading Level: 9.1 Bloom Level: Application (Cut Score: 0.60
ID: 4441 Curriculum(s): ES: MT12, MTO: 5-1-3, NR2011: ME26, NR2015: ME12

- A: Transport urgently.
- B: Maintain the airway.
- C: Control the bleeding.
- D: Reassure the patient.

This patient is bleeding externally from his access site. Patient's who receive dialysis may have clotting disorders, attempting to control any external bleeding should be your highest priority as it is part of the primary assessment (ABC's) followed by urgent transport. The patient demonstrates that they are maintaining their own airway by speaking to you. Calming and reassuring the patient is an important piece too, but the ABC's must be addressed first.

119. Provider Level: EMT Reading Level: 10.0 Bloom Level: Analysis (Co Cut Score: 0.90
ID: 835 Curriculum(s): ES: MT9, MTO: 4-6-3, NR2011: ME10, NR2015: ME7

- A: Inducing emesis.
- B: Administering activated charcoal.
- C: Diluting with milk.
- D: Whole bowel irrigation.

Activated charcoal is by far the most widely used and most effective means to prevent absorption of an ingested toxin into the small intestine and eventually into the bloodstream.

120. Provider Level: EMT Reading Level: 3.6 Bloom Level: Knowledge (Cut Score: 0.45
ID: 3929 Curriculum(s): ES: MT14

- A: Myalgia.
- B: Myositis.
- C: Myeloma.
- D: Neuralgia.

Myalgia describes muscle pain. "My" refers to muscle and "algia" refers to pain.

121. Provider Level: EMT Reading Level: 8.9 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 3983 Curriculum(s): ES: MT7, NR2011: ME22, NR2015: ME6

- A: Alcoholism.
- B: Cardiac event.
- C: Chemotherapy.
- D: Marijuana abuse.

The absence of alcohol intake, or "withdrawal" in an alcoholic patient can bring about a seizure. Typically the family would know if there is a history of daily alcohol intake and possibly the cause for withdrawal. Use of marijuana, cardiac events, or chemotherapy would not typically bring about a seizure without evidence of hypoxia.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 32 of 53

122. Provider Level: EMT Reading Level: 7.2 Bloom Level: Synthesis (C) Cut Score: 0.45
ID: 4430 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Stroke.
- B: Heart attack.
- C: Aortic aneurysm.
- D: Brain hemorrhage.

Any patient with rapid onset of acute abdominal pain should be suspected of aortic aneurysm until proven otherwise. If the pain is described as “tearing” or “going through to the back” these should add to your suspicions. These pains followed with signs of hypovolemic shock are also indicative.

123. Provider Level: EMT Reading Level: 12.0 Bloom Level: Application (C) Cut Score: 0.90
ID: 1029 Curriculum(s): ES: MT10, MTO: 1-5-10, NR2011: AB1, NR2015: AB4

- A: A dry face.
- B: Blue lips and fingers.
- C: Yellow skin.
- D: Sweaty palms/hands.

Blue lips and fingers describe cyanosis, a common sign of inadequate breathing.

124. Provider Level: EMT Reading Level: 5.0 Bloom Level: Analysis (C) Cut Score: 0.90
ID: 4101 Curriculum(s): ES: MT3, NR2011: ME21, NR2015: ME4

- A: Contagious.
- B: Dehydrated.
- C: Head injured.
- D: Malnourished.

Any child that has been vomiting is at risk for dehydration and possible hypovolemic shock. The skin color and rapid pulse indicate this condition also.

125. Provider Level: EMT Reading Level: 11.5 Bloom Level: Knowledge (C) Cut Score: 0.90
ID: 2948 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Ischemia.
- B: Infarction.
- C: Distention.
- D: Inflammation.

Peritonitis is inflammation of the peritoneum. Distention causes pain in organs surrounded by viscera. Infarcted tissue does not hurt.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 33 of 53

126. Provider Level: EMT Reading Level: 7.5 Bloom Level: Knowledge (Cut Score: 0.45
ID: 840 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: The walls of solid organs.
- B: The walls of hollow organs.
- C: Autonomic nerve fibers.
- D: Organs that are bleeding.

Visceral pain is also dull in nature and more generalized.

127. Provider Level: EMT Reading Level: 10.2 Bloom Level: Knowledge (Cut Score: 0.60
ID: 1542 Curriculum(s): ES: MT11, NR2011: ME13, NR2015: ME8

- A: Plasma.
- B: Proteins.
- C: Leukocytes.
- D: Erythrocytes.

Blood is primarily composed of plasma, which accounts for approximately 54% of a standard volume of blood. Erythrocytes, or red blood cells, would then make up the next largest component.

128. Provider Level: EMT Reading Level: 11.5 Bloom Level: Comprehensi Cut Score: 0.60
ID: 421 Curriculum(s): ES: MT10, MTO: 4-2-8, NR2011: AB4, NR2015: AB7

- A: Decreased level of consciousness.
- B: Decreased blood pressure.
- C: Difficulty swallowing.
- D: Increased heart rate.

Though intended to affect only the lungs, most inhalers will also cause an increase in heart rate as a part of their sympathetic action.

129. Provider Level: EMT Reading Level: 6.4 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 3539 Curriculum(s): ES: MT5, MTO: 6-1-11, NR2011: OB6, NR2015: ME4

- A: Chicken pox.
- B: Influenza.
- C: Measles.
- D: Meningitis.

This child is presenting with the classic symptoms and signs of meningitis. Children with ventriculoperitoneal shunts are at a very high risk.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 34 of 53

130. Provider Level: EMT Reading Level: 8.3 Bloom Level: Knowledge (Cut Score: 0.60
ID: 909 Curriculum(s): ES: MT9, MTO: 4-6-1, NR2011: ME10, NR2015: ME7

A: Inhalation.

B: Ingestion.

C: Injection.

D: Absorption.

Some of the more commonly ingested poisons include household products, cleaning agents, cosmetics, drugs, plants, and foods.

131. Provider Level: EMT Reading Level: 8.2 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 1476 Curriculum(s): ES: MT13, NR2011: OB4, NR2015: ME10

A: Do you take oral contraceptives?

B: Are you, or could you be, pregnant?

C: When was your last menstrual period?

D: When did you last have sexual intercourse?

Asking when the patient last had sexual intercourse is inappropriate. The other questions have a medical basis to rule out pregnancy or other related medical conditions.

132. Provider Level: EMT Reading Level: 8.7 Bloom Level: Knowledge (Cut Score: 0.60
ID: 1940 Curriculum(s): ES: MT7, NR2011: ME22, NR2015: ME6

A: Divorce.

B: Depression.

C: Living alone.

D: Alcohol or drug abuse.

Though all are risk factors, suicide is 500 times more common in patients who are severely depressed.

133. Provider Level: EMT Reading Level: 10.0 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 3993 Curriculum(s): ES: MT9, NR2011: ME11, NR2015: ME7

A: The patient has taken something.

B: The patient has a cardiac history.

C: The patient has been electrocuted.

D: The patient fainted after the accident.

Substance abuse should always be considered in patients with altered mental status. This is because it is so common. The other factors listed should be ruled out but are unlikely given the history and scene information.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 35 of 53

134. Provider Level: EMT Reading Level: 8.4 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 3871 Curriculum(s): ES: MT1

- A: Having tunnel vision.
- B: Listening to lung sounds.
- C: Obtaining a medical history.
- D: Performing an adequate scene survey.

Our “dispatched to” information can often create a tunnel vision situation where we fail to see other alternatives. The other choices should not present a common challenge in his situation.

135. Provider Level: EMT Reading Level: 10.1 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 1477 Curriculum(s): ES: MT13, NR2011: OB4, NR2015: ME10

- A: Have the Basic EMT attend on this call.
- B: Have the advanced provider attend on this call.
- C: Have the police transport the patient to the hospital.
- D: Call a supervisor to accompany the patient during transport.

As the patient is stable, having the female EMT attend on this call would be the most appropriate action.

136. Provider Level: EMT Reading Level: 6.7 Bloom Level: Comprehensi Cut Score: 0.60
ID: 3941 Curriculum(s): ES: MT12, NR2011: TR6, NR2015: TR5

- A: Standard call.
- B: Potential suicide.
- C: Psychiatric case.
- D: Sexual assault victim.

Sexual assault victim. The patient may have inserted the foreign object or another person may have forced it. The protection of evidence remains as a potential sexual assault case until proven otherwise.

137. Provider Level: EMT Reading Level: 7.6 Bloom Level: Application (Cut Score: 0.60
ID: 4435 Curriculum(s): ES: MT11, MTO: 5-1-3, NR2011: ME13, NR2015: ME8

- A: Too much oxygen.
- B: Clotting disorder.
- C: Hypertension.
- D: Hypotension.

Most bleeding wounds can be controlled with direct pressure for ten minutes. When it takes more time, you should question if the patient has a clotting disorder or takes a blood thinner. Other measures to control bleeding must be started in this situation.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 36 of 53

138. Provider Level: EMT Reading Level: 7.7 Bloom Level: Comprehensi Cut Score: 0.90
ID: 952 Curriculum(s): ES: MT12, NR2011: ME8, NR2015: ME9

- A: Acute renal failure.
- B: Chronic renal failure.
- C: Urinary tract infection.
- D: Renal calculi.

Other assessment findings include difficulty in beginning and continuing to void, a foul odor to the urine, and inability to void completely.

139. Provider Level: EMT Reading Level: 12.0 Bloom Level: Comprehensi Cut Score: 0.60
ID: 1582 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Auscultation.
- B: Inspection.
- C: Palpation.
- D: Percussion.

Auscultation is the least useful examination component. Percussion also has limited use, but there are some situations in which percussion, such as in the flank area, is a useful tool.

140. Provider Level: EMT Reading Level: 8.3 Bloom Level: Knowledge (Cut Score: 0.60
ID: 1602 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Bilirubin.
- B: Jaundice.
- C: Scleral icterus.
- D: McBurney's sign.

Scleral icterus is the term for the yellowing of the whites of the eyes. Jaundice is the term for the yellowing of the skin.

141. Provider Level: EMT Reading Level: 11.0 Bloom Level: Synthesis (C Cut Score: 0.90
ID: 4408 Curriculum(s): ES: MT4, MTO: 4-5-7, NR2011: ME6, NR2015: ME3

- A: To protect you from potential liability issues.
- B: There is a significant potential for the allergic response to increase.
- C: Benadryl has been proven to be ineffective in cases of seafood allergies.
- D: The Emergency Department is best at dealing with mild allergic reactions.

Patients who are having an allergic response may improve, or the allergic response may increase over time. There is the concern that the airway will be affected and swell closed. Therefore, this type of patient does best in the ED where they can be monitored closely and receive medication to reverse the reaction.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 37 of 53

142. Provider Level: EMT Reading Level: 11.2 Bloom Level: Knowledge (Cut Score: 0.60
ID: 782 Curriculum(s): ES: MT11, NR2011: ME13, NR2015: ME8

- A: Iron.
- B: Platelets.
- C: White blood cells.
- D: Red blood cells.

There are numerous types of anemia including aplastic and sickle cell.

143. Provider Level: EMT Reading Level: 7.3 Bloom Level: Evaluation (C Cut Score: 0.60
ID: 4431 Curriculum(s): ES: MT3, NR2011: ME10, NR2015: ME7

- A: Start 2 liters of oxygen.
- B: Prepare for rapid transport.
- C: Identify the source of the poisoning.
- D: Get the patient to start drinking some water.

Rapid transport is indicated for this patient so that the hospital can determine the cause of her illness. She will need volume replacement but we should not delay transport for this. Administering fluids by mouth will just cause the patient to vomit more.

144. Provider Level: EMT Reading Level: 8.1 Bloom Level: Evaluation (C Cut Score: 0.60
ID: 4097 Curriculum(s): ES: MT1, NR2011: ME3, NR2015: ME1

- A: Administer sugar to the patient.
- B: Ventilate the patient at 12 times per minute.
- C: Communicate compassionately with the family.
- D: Wrap the patient in a heavy blanket and backboard him.

Any patient who is breathing six times per minute will need to have their ventilations assisted and oxygen administered. Preparing the patient for transport and monitoring them closely is also important, but supporting their oxygenation is highest priority.

145. Provider Level: EMT Reading Level: 7.2 Bloom Level: Application (Cut Score: 0.60
ID: 1189 Curriculum(s): ES: MT8, MTO: 4-3-7, NR2011: CA1, NR2015: CA1

- A: Tri-pod.
- B: Semi-fowler's.
- C: Lying supine.
- D: Trendelenburg.

Semi-fowler's is sitting up at an angle on the stretcher. This reduces stress on the body and is often seen as a position of comfort. Supine and trendelenburg (flat on back) will not be tolerated by cardiac patients experiencing chest pain. The tri-pod position is typically seen with patients in respiratory distress.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 38 of 53

146. Provider Level: EMT Reading Level: 10.6 Bloom Level: Application (Cut Score: 0.60
ID: 1040 Curriculum(s): ES: MT2, MTO: 1-5-26, NR2011: ME2, NR2015: ME1

- A: Bystanders' detailed description of seizure activity.
- B: Additional information from 911 dispatch center.
- C: Locating a medic alert bracelet on the patient's wrist.
- D: Information from a friend who says the patient smokes a lot.

Once on scene, it is very important to determine why a patient may be unconscious. This will help you decide how to treat the victim properly. Bystanders describing the seizures, additional information from dispatch, and history of smoking is not as useful.

147. Provider Level: EMT Reading Level: 9.0 Bloom Level: Comprehensi Cut Score: 0.45
ID: 1203 Curriculum(s): ES: MT8, MTO: 4-3-46, NR2011: CA1, NR2015: CA1

- A: To relieve chest pain.
- B: To reduce the blood pressure.
- C: To thin the blood clot from the coronary artery.
- D: To increase circulation to the affected area of the heart.

Nitroglycerin is a potent vasodilator. Our goal is to open up the coronary arteries to increase blood flow to the affected area of the heart. It is not an analgesic (pain) medicine. In fact, it has a common side effect of causing a headache when administered. Reducing a chest pain patient's blood pressure can cause the heart rate to increase and make the infarction worse.

148. Provider Level: EMT Reading Level: 11.1 Bloom Level: Knowledge (Cut Score: 0.60
ID: 1669 Curriculum(s): ES: MT2, NR2011: ME2, NR2015: ME1

- A: Tonic.
- B: Clonic.
- C: Dystonic.
- D: Postictal.

The tonic phase is characterized by muscle rigidity. The clonic phase is the rhythmic movement phase. The postictal phase is the period immediately following the seizure.

149. Provider Level: EMT Reading Level: 10.7 Bloom Level: Knowledge (Cut Score: 0.45
ID: 873 Curriculum(s): ES: MT4, NR2011: ME6, NR2015: ME3

- A: Antigen.
- B: Allergen.
- C: Antibody.
- D: Toxin.

Following exposure to an antigen, antibodies are released from the cells of the immune system.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 39 of 53

150. Provider Level: EMT Reading Level: 4.5 Bloom Level: Comprehensi Cut Score: 0.90
ID: 3923 Curriculum(s): ES: MT14, NR2011: TR10, NR2015: TR6

- A: Last physician evaluation.
- B: New pain vs. chronic pain.
- C: Time of last meal.
- D: Time of last bowel movement.

New pain versus chronic pain will help you determine if a new injury exists. The other factors may be important but new versus old is the primary questions.

151. Provider Level: EMT Reading Level: 6.6 Bloom Level: Synthesis (C Cut Score: 0.45
ID: 4104 Curriculum(s): ES: MT4, NR2011: ME6, NR2015: ME3

- A: Contact medical control for medication orders.
- B: Have the child immediately taken to the emergency department.
- C: Recommend the mother contact the child's primary care physician.
- D: Contact dispatch to request ALS respond for medication administration.

The child may be having an allergic reaction but is obviously not in need of immediate medication administration. There is time for the parent to contact the primary care physician for an office appointment.

152. Provider Level: EMT Reading Level: 7.5 Bloom Level: Comprehensi Cut Score: 0.90
ID: 3938 Curriculum(s): ES: MT12, NR2011: ME8, NR2015: ME9

- A: Unable to remove wastes from the blood.
- B: Unable to circulate blood back to the heart.
- C: Infected and that may spread throughout body.
- D: Prone to hemorrhaging into the retro peritoneum.

Unable to remove wastes from the blood. During renal disease the kidneys no longer function properly and wastes remain in the blood unless they are filtered out through dialysis. Renal disease is a problem separate from infection. Renal disease with the shutdown of the glomerulus does not increase the risk of bleeding.

153. Provider Level: EMT Reading Level: 8.3 Bloom Level: Comprehensi Cut Score: 0.45
ID: 1150 Curriculum(s): ES: MT8, MTO: 4-3-5, NR2011: CA3, NR2015: CA3

- A: Early defibrillation.
- B: Early access.
- C: Early CPR.
- D: ALS.

The EMT can most effectively change the outcome of a major cardiac event by providing early defibrillation. Early access and early CPR are usually out of the hands of the EMT.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 40 of 53

154. Provider Level: EMT Reading Level: 15.4 Bloom Level: Knowledge (Cut Score: 0.60
ID: 1628 Curriculum(s): ES: MT4, NR2011: ME7, NR2015: ME3

- A: Allergy.
- B: Anaphylaxis.
- C: Hypersensitivity.
- D: Primary response.

The definition is that of anaphylaxis. Hypersensitivity and allergy are synonymous. Primary response is the initial generalized response to an antigen and does not usually result in anaphylaxis.

155. Provider Level: EMT Reading Level: 10.7 Bloom Level: Knowledge (Cut Score: 0.90
ID: 3973 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Blindness.
- B: Cancer.
- C: Deafness.
- D: Alcoholism.

The leading cause of blindness in the U.S. is diabetes. Uncontrolled blood glucose damages the blood vessels in the eye. Other medical conditions such as skin disorders, joint and bone problems, renal issues, and many other conditions can also occur..

156. Provider Level: EMT Reading Level: 9.0 Bloom Level: Application (Cut Score: 0.45
ID: 1152 Curriculum(s): ES: MT8, MTO: 4-3-2, NR2011: CA1, NR2015: CA1

- A: Test his blood glucose.
- B: Check for medical alert tags.
- C: Assist him with his own nitroglycerin.
- D: Apply the automated external defibrillator to his chest.

The patient who experiences chest pain and is prescribed nitroglycerin should take his medicine as allowed by medical control. You must be sure he is not hypotensive which in this case he clearly is not. If needed, applying oxygen would be another indicated treatment. The other actions will not likely benefit this patient and applying the AED could be harmful.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 41 of 53

157. Provider Level: EMT Reading Level: 9.8 Bloom Level: Analysis (Co) Cut Score: 0.90
ID: 2200 Curriculum(s): ES: MT3, NR2011: ME9, NR2015: ME2

- A: Protecting the airway.
- B: Controlling the bleeding.
- C: Providing adequate ventilations.
- D: Performing a rapid physical exam.

The copious amount of vomit presents an airway concern so protecting the airway, either by placing an advanced airway or just proper positioning, should be your highest priority. As the bleed is internal, controlling the bleeding is not something you can do. As a life threat was discovered during the initial assessment, you would not move into a rapid physical or medical assessment until you had addressed the immediate life threat.

158. Provider Level: EMT Reading Level: 9.7 Bloom Level: Comprehensi Cut Score: 0.60
ID: 4110 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Exercising daily.
- B: Getting a good night's rest.
- C: Eating a balanced meal on time.
- D: Avoiding any alcohol consumption.

Diabetics must eat on time or their blood glucose level can drop dangerously low. They often carry a snack with them in case their meal is delayed. Regular exercise is very important and they adjust their intake to accommodate that. Alcohol does not have to be avoided, but all things in moderation is a good guide.

159. Provider Level: EMT Reading Level: 8.9 Bloom Level: Comprehensi Cut Score: 0.60
ID: 4109 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Low blood glucose slow in onset.
- B: High blood glucose slow in onset.
- C: Low blood glucose rapid in onset.
- D: High blood glucose, rapid in onset.

Low blood glucose, rapid in onset is the most common medical emergency for diabetics. If the glucose level drops slowly over time, the body is often able to compensate for the drop and release stored sugar from the liver and other tissues.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 42 of 53

160. Provider Level: EMT Reading Level: 6.2 Bloom Level: Application (Cut Score: 0.60
ID: 4116 Curriculum(s): ES: MT15, NR2011: OB13, NR2015: ME2

- A: Suggest the parents call the child's surgeon in the morning.
- B: Monitor the child and request an emergency response from ALS.
- C: Finish the primary assessment, lay the child supine, and administer oxygen.
- D: Finish assessing the child and recommend transporting him to the emergency department.

Finishing the primary assessment to assure that the child is stable is very important. The presence of coffee-ground emesis is most likely a result of bleeding earlier from the surgery and, if isolated, not an emergency. If, however, the vomiting continues, the pain, discomfort, and potential for damage to the sutures would suggest that transportation to the emergency department would be the most appropriate. An emergent response from ALS is not needed at this time, given there is no current distress, and would only serve to frighten the parents.

161. Provider Level: EMT Reading Level: 16.3 Bloom Level: Application (Cut Score: 0.45
ID: 436 Curriculum(s): ES: MT9, MTO: 4-6-2, NR2011: ME10, NR2015: ME7

- A: Aspirin.
- B: Insecticide.
- C: Antihistamine.
- D: Acetaminophen.

An insecticide with organophosphates would best fit the description of the signs and symptoms provided. (SLUDGE)

162. Provider Level: EMT Reading Level: 8.7 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 1100 Curriculum(s): ES: MT10, MTO: 2-1-3, NR2011: AB1, NR2015: AB3

- A: Weak pulse.
- B: Slow heart rate.
- C: Shallow breathing.
- D: Good breath sounds.

Patients who are found to be breathing 20 times/minute but with shallow breaths should be considered to be breathing inadequately. The term shallow indicates that tidal volume is low. A slow heart rate is a common side effect for pediatric patients, not adults. A weak pulse would be a sign of inadequate circulation, not breathing.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 43 of 53

163. Provider Level: EMT Reading Level: 7.0 Bloom Level: Application (Cut Score: 0.60
ID: 3537 Curriculum(s): ES: MT5, MTO: 6-1-12, NR2011: OB6, NR2015: ME4

- A: Administer aspirin.
- B: Administer children's Tylenol.
- C: Provide high-concentration oxygen.
- D: Cool the child with a tepid sponge bath.

Given the patient has a decreased level of consciousness, administering supplemental oxygen would be appropriate. It is outside the Basic EMT's scope of practice to administer Tylenol. Actively cooling the patient would be inappropriate, as the peripheral blood vessels will constrict and raise the internal temperature. Administering aspirin is inappropriate, as it can cause Reye's syndrome.

164. Provider Level: EMT Reading Level: 7.4 Bloom Level: Analysis (Co Cut Score: 0.90
ID: 487 Curriculum(s): ES: MT4, MTO: 4-5-3, NR2011: ME7, NR2015: ME3

- A: Flushed skin and hives.
- B: Rapid heart rate.
- C: Swollen tongue.
- D: Runny nose.

The swollen tongue is indicative that the airway may become compromised. Though the nose is involved, the tongue is a more ominous sign.

165. Provider Level: EMT Reading Level: 5.8 Bloom Level: Application (Cut Score: 0.45
ID: 482 Curriculum(s): ES: MT13, MTO: 4-9-18, NR2011: OB4, NR2015: ME10

- A: Placing the patient on her right side.
- B: Looking for signs of imminent delivery.
- C: Controlling any bleeding from the vagina.
- D: Administering high-concentration oxygen.

This patient is showing signs of an ectopic pregnancy and needs high-concentration oxygen. The location of the pain does not indicate imminent delivery. Ectopic pregnancies do not usually cause vaginal bleeding.

166. Provider Level: EMT Reading Level: 7.2 Bloom Level: Analysis (Co Cut Score: 0.90
ID: 3998 Curriculum(s): ES: MT9, NR2011: ME11, NR2015: ME7

- A: Determine any suicidal tendencies.
- B: Determine how much the patient has had to drink.
- C: Obtain consent before the patient is unable to speak.
- D: Obtain history of the event before the patient goes unresponsive.

Obtaining a history will help you to determine if the fall was truly an accident, if there was a medical problem or substance abuse influence causing the fall.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 44 of 53

167. Provider Level: EMT Reading Level: 5.6 Bloom Level: Analysis (Co) Cut Score: 0.90
ID: 4103 Curriculum(s): ES: MT4, NR2011: ME7, NR2015: ME3

- A: Stroke.
- B: Bee sting.
- C: Food allergy.
- D: Food poisoning.

Any swelling of the mouth or airway is a sign of potential allergic reaction. If the patient was eating at the time of onset, it most likely is related to food. Other causes for the allergic reaction should be investigated during follow-up physician care.

168. Provider Level: EMT Reading Level: 10.4 Bloom Level: Knowledge (Cut Score: 0.45
ID: 1988 Curriculum(s): ES: MT15

- A: The acoustic meatus.
- B: The tragus.
- C: The hyoid.
- D: The pinna.

This is an anatomical reference point used to evaluate the temporomandibular joint.

169. Provider Level: EMT Reading Level: 6.5 Bloom Level: Evaluation (C) Cut Score: 0.45
ID: 4448 Curriculum(s): ES: MT13, MTO: 4-9-18, NR2011: OB4, NR2015: ME10

- A: Call in a female sexual assault counselor.
- B: Try to find someone in the area that knows her.
- C: Observe her until she is ready to be transported.
- D: Get enough personnel to forcefully take her to the ambulance.

It would be best to get a sexual assault counselor to the scene who might be able to talk to the patient so that she will consent to transport to the ED. More counseling can be done along with a sexual assault investigation or assessment of her behavioral emergency.

170. Provider Level: EMT Reading Level: 12.0 Bloom Level: Knowledge (Cut Score: 0.60
ID: 918 Curriculum(s): ES: MT2, NR2011: ME2, NR2015: ME1

- A: The aura.
- B: Tonic phase.
- C: Clonic phase.
- D: Postictal period.

The aura precedes the actual seizure. The tonic phase is characterized by tensed, contracted muscles, and the postictal period is a period after the seizure where consciousness is regained.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 45 of 53

171. Provider Level: EMT Reading Level: 10.5 Bloom Level: Application (Cut Score: 0.60
ID: 2287 Curriculum(s): ES: MT10, NR2011: AB1, NR2015: AB7

- A: Central nervous system level of function.
- B: Likelihood the patient has a gag reflex.
- C: Whether the patient will tolerate an IV.
- D: Peripheral nerve integrity.

Checking eyelash reflexes (brushing the eyelashes) and checking response to pain are techniques to assess the patient's ability to maintain her own airway. These stimuli would assess level of consciousness but a central nervous system function assessment would require a more in depth study than these two stimuli.

172. Provider Level: EMT Reading Level: 7.4 Bloom Level: Application (Cut Score: 0.90
ID: 1047 Curriculum(s): ES: MT10, MTO: 1-6-6, NR2011: AB1, NR2015: AB3

- A: Orthopedic cot.
- B: Flexible stretcher.
- C: Portable stretcher.
- D: Stair chair.

Stair chairs are very useful for moving patients down stairs to reduce the injury risk. The patient who complains of difficulty breathing will not tolerate lying down on a stretcher.

173. Provider Level: EMT Reading Level: 10.7 Bloom Level: Comprehensi Cut Score: 0.60
ID: 3932 Curriculum(s): ES: MT14, NR2011: ME26, NR2015: ME12

- A: Affects on PNS.
- B: Loss of mobility.
- C: Respiratory failure.
- D: Widespread decubitus.

Respiratory failure will eventually occur in muscular dystrophy patients. The other factors listed are all concerns but when the respiratory muscles fail, the patient will no longer be able to breathe on their own.

174. Provider Level: EMT Reading Level: 8.3 Bloom Level: Application (Cut Score: 0.60
ID: 2435 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Stop assessing or treating the patient until he lets you inspect and palpate his abdomen.
- B: Tell him how important it is that you palpate his abdomen and explain the consequences if he refuses.
- C: Threaten to contact medical control for permission to restrain him unless he permits you to continue the exam.
- D: Discontinue the physical exam immediately and initiate transport to the hospital without further assessment.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 46 of 53

Communication with a 15 year-old should include why it is necessary to complete the physical exam and the consequences of not doing so. This particular age group (adolescents) requires honesty and a reminder of how important compliance is to their well-being. Threats or not continuing the exam are dangerous alternatives.

175. Provider Level: EMT Reading Level: 8.0 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 1773 Curriculum(s): ES: MT7, MTO: 4-8-9, NR2011: ME22, NR2015: ME6

- A: Applying restraints to immobilize the patient to a stretcher.
- B: Telling the patient you hear voices too, when you do not.
- C: Calling for transport to the hospital against the patient's wishes.
- D: Putting a disposable mask on the patient who is spitting and crying.

You should not tell a patient having auditory hallucination that you hear voices too. This decision is not only in poor taste but is also improper care of a psychiatric patient. Experience will show you that when dealing with these types of calls, you may occasionally have to restrain, transport a patient against his will, or protect yourself from an exposure risk. This is considered within the normal standard of care.

176. Provider Level: EMT Reading Level: 12.0 Bloom Level: Comprehensi Cut Score: 0.45
ID: 2963 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Visceral--dull, poorly localized pain.
- B: Somatic/parietal--dull, poorly localized pain.
- C: Visceral--sharp, easily localized pain.
- D: Somatic/parietal--sharp, easily localized pain.

Peritoneal pain generally produces somatic/parietal pain, which is described as sharp and is easily localized.

177. Provider Level: EMT Reading Level: 9.7 Bloom Level: Knowledge (Cut Score: 0.60
ID: 3922 Curriculum(s): ES: MT14

- A: Cellulitis.
- B: Decubitus.
- C: Fasciitis.
- D: Gangrene.

Decubitus (ulcers) are patches of skin that have broken down due to too much pressure on the skin when the patient is left in one position too long, or from shearing of skin during patient movement. Fasciitis, gangrene and cellulitis are other soft tissue condition but generally not due to pressure on the skin.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 47 of 53

178. Provider Level: EMT Reading Level: 9.2 Bloom Level: Knowledge (Cut Score: 0.60
ID: 4422 Curriculum(s): ES: MT1, MTO: 1-5-23

- A: Medic Alert tags.
- B: Signs of bruising.
- C: Extremity fracture.
- D: Response to treatment.

It is key to identify any medical alert tags or medical jewelry that may help you to identify the cause of the unresponsiveness in this patient. Of course any family members that might be present will also help to collect this information. All of the other responses would occur later in the assessment process.

179. Provider Level: EMT Reading Level: 6.3 Bloom Level: Application (Cut Score: 0.60
ID: 4106 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Tell the teacher you need consent from the parent before any treatment.
- B: Administer oxygen, call for ALS, and consider assisting with oral glucose.
- C: Restrain the child on a backboard, administer 100% oxygen, and call for ALS.
- D: Let the teacher continue to care for the child and ask that the parents be called.

Young children with insulin dependent diabetes can have a rapid onset of low blood glucose. It is important to diagnose the problem and offer prompt treatment. Oxygen is supportive but will not change the problem. Teachers and staff are often prepared for this emergency. Assist them as possible until ALS arrives.

180. Provider Level: EMT Reading Level: 12.0 Bloom Level: Knowledge (Cut Score: 0.60
ID: 836 Curriculum(s): ES: MT6, NR2011: ME4, NR2015: ME5

- A: Too little insulin.
- B: Too much insulin.
- C: Too much sugar.
- D: Too little sugar.

This most commonly occurs in Type I diabetes, when there is an inadequate production or non-productive use of insulin in the body.

181. Provider Level: EMT Reading Level: 11.8 Bloom Level: Analysis (Co Cut Score: 0.90
ID: 3954 Curriculum(s): ES: MT2, NR2011: ME2, NR2015: ME1

- A: The patient may bite her lip.
- B: She may wake up and be frightened.
- C: She may wake up and refuse transportation.
- D: A decreased level of consciousness may follow.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 48 of 53

A decreased level of consciousness commonly follows a generalized seizure, known as the postictal phase. The concern is that the patient may not be able to manage her own airway during this time. The other options may occur following a seizure but are not as concerning as further loss of consciousness.

182. Provider Level: EMT Reading Level: 6.7 Bloom Level: Application (Cut Score: 0.60
ID: 439 Curriculum(s): ES: MT9, MTO: 4-6-5, NR2011: ME10, NR2015: ME7

- A: Hypotension.
- B: A swelling airway.
- C: Burns to the body.
- D: Poisoning through inhalation.

A swelling airway would be your most immediate concern followed by poisoning through inhalation.

183. Provider Level: EMT Reading Level: 10.2 Bloom Level: Evaluation (C Cut Score: 0.60
ID: 4437 Curriculum(s): ES: MT11, MTO: 5-1-10, NR2011: ME13, NR2015: ME8

- A: Renal diagnostics.
- B: Fluid replacement.
- C: Monitoring for seizures.
- D: Renal failure monitoring.

During hemodialysis patients can lose too much fluid volume and they need fluid replacement. The symptoms of this can sometimes occur after the dialysis is completed and they will need transport to a facility where they can receive fluid replacement and monitoring.

184. Provider Level: EMT Reading Level: 9.7 Bloom Level: Application (Cut Score: 0.60
ID: 1116 Curriculum(s): ES: MT10, MTO: 2-1-13, NR2011: AB4, NR2015: AB2

- A: The patient becomes quiet and stops breathing on his own.
- B: The patient's stomach begins expanding with ventilations.
- C: The patient's color changes from cyanotic to mottled.
- D: The patient's chest rises and falls with ventilations.

Chest rising and falling indicates air is flowing in and out of the chest. The other findings are critical indicators the ventilations are failing.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 49 of 53

185. Provider Level: EMT Reading Level: 8.0 Bloom Level: Application (Cut Score: 0.45
ID: 3910 Curriculum(s): ES: MT15

- A: Promote self-care.
- B: Calm and reassure.
- C: Reduce strong lighting.
- D: Utilize standard precautions.

Calming and reassurance are very important in the care of a patient with an eye problem, as this patient's primary concern is the loss of, or potential loss of vision. All the other factors are important but are secondary to the relieving of anxiety.

186. Provider Level: EMT Reading Level: 7.4 Bloom Level: Analysis (Co Cut Score: 0.60
ID: 1115 Curriculum(s): ES: MT10, MTO: 2-1-24, NR2011: AB1, NR2015: AB3

- A: Protocol requires us to administer high-concentration oxygen to you because of your chief complaint.
- B: I'm concerned that your oxygen level is critically low and that is why you are having shortness of breath.
- C: Don't be nervous, we administer high amounts of oxygen all the time and it's harmless.
- D: Why do you ask? Are you afraid we're doing something wrong?

A patient with a history of shortness of breath should be given oxygen unless there is a valid reason for withholding it. In most cases, oxygen may safely be given to a dyspneic COPD patient.

187. Provider Level: EMT Reading Level: 9.6 Bloom Level: Analysis (Co Cut Score: 0.45
ID: 1629 Curriculum(s): ES: MT4, NR2011: ME7, NR2015: ME3

- A: Urticaria.
- B: Wheezing.
- C: Increase in gastric motility.
- D: Decrease in blood pressure.

Initially the heart rate and blood pressure will increase. When a sufficient number of vessels vasodilate, you will then see a fall in blood pressure and reflex tachycardia. This is then followed by a bradycardia, which is a very late sign. The other three choices listed happen earlier in the anaphylaxis evolution.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 50 of 53

188. Provider Level: EMT Reading Level: 9.1 Bloom Level: Analysis (Co) Cut Score: 0.45
ID: 1174 Curriculum(s): ES: MT8, MTO: 4-3-9, NR2011: CA1, NR2015: CA1

- A: It is a normal finding for a cardiac patient and not a cause for concern.
- B: The patient is at risk of going into cardiac arrest and he may require CPR.
- C: Irregular heartbeats indicate the patient currently has a respiratory problem.
- D: Back and jaw pain with irregular heartbeats indicate high blood pressure issues.

A new onset of an arrhythmia accompanying back/jaw pain is considered a critical finding. It most likely indicates the heart muscle is extremely ischemic and could be a hint of an impending cardiac arrest event. It should be considered "abnormal" even if the patient has a history of an irregular rhythm.

189. Provider Level: EMT Reading Level: 9.1 Bloom Level: Knowledge (Cut Score: 0.60
ID: 1987 Curriculum(s): ES: MT15

- A: Watery eyes.
- B: Dry mouth.
- C: Sore throat.
- D: Runny nose.

One of the primary causes of this condition is seasonal allergies.

190. Provider Level: EMT Reading Level: 6.1 Bloom Level: Application (Cut Score: 0.45
ID: 1293 Curriculum(s): ES: MT5, MTO: 6-1-12, NR2011: OB6, NR2015: ME4

- A: Call ALS and request assistance.
- B: Suction with a rigid catheter.
- C: Roll the patient on his side.
- D: Insert an OPA airway.

Rolling the patient on his side after a seizure will quickly clear the majority of secretions from the child's airway. This also reduces the chances of aspiration. Suctioning can then be performed.

191. Provider Level: EMT Reading Level: 11.8 Bloom Level: Analysis (Co) Cut Score: 0.60
ID: 2207 Curriculum(s): ES: MT4, NR2011: ME6, NR2015: ME3

- A: Pulse.
- B: Lung sounds.
- C: Skin condition.
- D: Blood pressure.

Your highest priority should be to assess lung sounds. If there is airway involvement, your treatment will be different and more expeditious than if there is no airway involvement.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 51 of 53

192. Provider Level: EMT Reading Level: 7.9 Bloom Level: Application (Cut Score: 0.45
ID: 4113 Curriculum(s): ES: MT13, NR2011: OB4, NR2015: ME10

- A: Secure the patient to a stretcher and place an absorbent pad under her.
- B: Finish your assessment, secure the patient to a backboard, and await ALS.
- C: Secure the patient to a stretcher, apply oxygen, and apply pressure to pelvic area.
- D: Finish your assessment, lay the patient in a position of comfort, and apply oxygen.

Finishing the assessment to determine what affect the bleeding has had on her is very important. Of course taking standard precautions must be done before you move the patient and there is risk of coming into contact with patient blood. Lying her flat and apply oxygen may help to control shock.

193. Provider Level: EMT Reading Level: 9.6 Bloom Level: Evaluation (C Cut Score: 0.45
ID: 4443 Curriculum(s): ES: MT12, MTO: 5-1-10, NR2011: ME26, NR2015: ME12

- A: Vomiting.
- B: Hypotension.
- C: Clotting disorder.
- D: Muscle cramping.

It is becoming more common for patients to receive hemodialysis in the home from mobile units. If they go to a stand-alone facility, they also can receive treatment and return home in the same day. Some of these patients experience complications when they are at home and will need to call for the assistance of EMS. Patients can experience hypovolemia during or following dialysis and may suffer from hypotension with resulting complications.

194. Provider Level: EMT Reading Level: 11.2 Bloom Level: Comprehensi Cut Score: 0.45
ID: 428 Curriculum(s): ES: MT7, MTO: 4-8-3, NR2011: ME22, NR2015: ME6

- A: Aspirin overdose.
- B: Low blood sugar.
- C: Reaction to stress.
- D: Loss of a loved one.

Low blood sugar would be a physical cause of a behavioral emergency. Reaction to stress and loss of a loved one are psychosocial causes and an aspirin overdose will not cause a behavioral emergency.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM

Page 52 of 53

195. Provider Level: EMT Reading Level: 10.4 Bloom Level: Comprehensi Cut Score: 0.60
ID: 441 Curriculum(s): ES: MT9, MTO: 4-6-7, NR2011: ME10, NR2015: ME7

- A: Contact medical direction.
- B: Call the poison control center.
- C: Memorize the treatment for each poison.
- D: Read the directions on the package of the poison.

Contacting medical direction would be the best way for the Basic EMT to receive directions regarding the proper treatment of a poisoning. If necessary, medical direction can contact poison control and relay additional treatment options to you. The directions on the packaging of the poison are often out of date.

196. Provider Level: EMT Reading Level: 12.6 Bloom Level: Comprehensi Cut Score: 0.45
ID: 2964 Curriculum(s): ES: MT3, NR2011: ME8, NR2015: ME2

- A: Severe visceral pain throughout the abdomen.
- B: Severe somatic pain throughout the abdomen.
- C: Severe visceral pain in the periumbilical region.
- D: Severe somatic pain in the right lower quadrant.

As the contents have spread throughout the abdomen, you should expect severe somatic (sharp and easily localized) pain throughout the abdomen. Initially the patient would have described the pain as a referred pain around the umbilicus and a dull, visceral pain in the right lower quadrant, as the appendix was irritated. Then when it ruptured, he would have described the pain as a severe, somatic pain in the right lower quadrant.

197. Provider Level: EMT Reading Level: 7.9 Bloom Level: Comprehensi Cut Score: 0.90
ID: 1120 Curriculum(s): ES: MT6, MTO: 4-4-4, NR2011: ME4, NR2015: ME5

- A: Unconsciousness.
- B: History of stroke.
- C: Prior heart attacks.
- D: Difficulty speaking.

If the patient is unconscious, he may aspirate the medication. Past medical history of cardiac problems, central nervous system injuries, and difficulty speaking are not contraindications for administration.

Medical Emergencies Practice test

Medical Emergencies Practice
Rob Clawson

Annotated Answer Key

9/11/2019 12:48:29 PM
Page 53 of 53

198. Provider Level: EMT Reading Level: 12.0 Bloom Level: Knowledge (Cut Score: 0.45
ID: 490 Curriculum(s): ES: MT4, MTO: 4-5-5, NR2011: ME7, NR2015: ME3

- A: On the lateral aspect of the thigh midway between the knee and waist.
- B: On the medial aspect of the thigh midway between the knee and waist.
- C: On the anterior aspect of the thigh midway between the knee and waist.
- D: On the lateral aspect of the arm midway between the shoulder and elbow.

The typical site is on the lateral aspect of the thigh midway between the knee and waist.

199. Provider Level: EMT Reading Level: 12.0 Bloom Level: Knowledge (Cut Score: 0.45
ID: 431 Curriculum(s): ES: MT7, MTO: 4-8-6, NR2011: ME22, NR2015: ME6

- A: Take your time.
- B: Do not identify yourself.
- C: Try to get vital signs early on.
- D: A detailed physical exam is essential.

Taking your time is a fundamental principle in the assessment of a patient with a behavioral emergency.

200. Provider Level: EMT Reading Level: 9.7 Bloom Level: Application (Cut Score: 0.60
ID: 4111 Curriculum(s): ES: MT12, NR2011: CA1, NR2015: CA1

- A: Assess the patient, apply 4 lpm oxygen, and ask the nurse if she administered nitro.
- B: Begin ventilations and perform an assessment being very careful to avoid any ports.
- C: Assess the patient, avoid taking a blood pressure on the arm with the shunt, and provide high flow oxygen.
- D: Assess the patient, determine if the patient has equal blood pressures in each arm, and provide supplemental oxygen.

The dialysis patient is the same as any other emergency patient except you should take a BP on the arm opposite of the shunt. They need assessment, oxygen, and prepared for transport