

01	A	B	C	D	E
02	A	B	C	D	E
03	A	B	C	D	E
04	A	B	C	D	E
05	A	B	C	D	E
06	A	B	C	D	E
07	A	B	C	D	E
08	A	B	C	D	E
09	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E

14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E
21	A	B	C	D	E
22	A	B	C	D	E
23	A	B	C	D	E
24	A	B	C	D	E
25	A	B	C	D	E
26	A	B	C	D	E

27	A	B	C	D	E
28	A	B	C	D	E
29	A	B	C	D	E
30	A	B	C	D	E
31	A	B	C	D	E
32	A	B	C	D	E
33	A	B	C	D	E
34	A	B	C	D	E
35	A	B	C	D	E
36	A	B	C	D	E
37	A	B	C	D	E
38	A	B	C	D	E
39	A	B	C	D	E

PRACTICE QUESTIONS

Elsevier Test Center Exam

AEMTE

HP Advanced EMT Exit Exam V1

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for Elsevier Test Center Exam **AEMTE**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **AEMTE**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1

MULTIPLE CHOICE

A patient presents with signs of inadequate oxygenation. Which of the following clinical findings indicate inadequate ventilation and require immediate intervention? (Choose two.)

- ☒ **A** Respiratory rate of 8 breaths per minute with shallow effort
- ☐ **B** SpO2 reading of 97% on room air
- ☒ **C** Cyanosis of the lips and nail beds
- ☐ **D** Strong, regular radial pulse at 78 beats per minute

ANSWER A - C

WHY A respiratory rate of 8 with shallow effort indicates hypoventilation and inadequate tidal volume, while cyanosis of the lips and nail beds is a classic sign of significant hypoxemia requiring immediate intervention. An SpO2 of 97% on room air and a strong radial pulse at 78 are within normal/acceptable limits and do not indicate inadequate oxygenation or ventilation.

QUESTION 2

MULTIPLE CHOICE

During the primary assessment of a trauma patient, the EMT identifies life-threatening conditions. Which of the following are components of the primary assessment (the ABCs)? (Choose two.)

- ☒ **A** Airway with cervical spine protection
- ☐ **B** Detailed head-to-toe physical exam
- ☒ **C** Breathing and ventilation assessment
- ☐ **D** SAMPLE history

ANSWER A - C

WHY The primary assessment focuses on Airway (with C-spine protection), Breathing, Circulation, Disability (neurologic status), and Exposure. A detailed head-to-toe exam and SAMPLE history are part of the secondary assessment, not the primary assessment.

QUESTION 3

SINGLE CHOICE

A 62-year-old male complains of crushing chest pain radiating to his left arm and jaw. He is diaphoretic and short of breath. Vital signs are BP 90/60, pulse 110, respirations 24, SpO2 92%. Which condition should the EMT suspect?

- ☒ **A** Acute myocardial infarction
- ☐ **B** Pulmonary embolism
- ☐ **C** Tension pneumothorax
- ☐ **D** Aortic dissection

ANSWER A

WHY Crushing substernal chest pain radiating to the left arm and jaw, combined with diaphoresis, dyspnea, hypotension, and tachycardia, is the classic presentation of acute myocardial infarction (AMI). While other conditions may share some symptoms, this constellation is hallmark for AMI.

QUESTION 4

SINGLE CHOICE

An adult patient with a blood glucose reading of 45 mg/dL is conscious but confused and able to swallow. According to standard EMT protocols, which medication is appropriate to administer?

- ☒ **A** Oral glucose
- ☐ **B** Aspirin
- ☐ **C** Activated charcoal
- ☐ **D** Naloxone

ANSWER A

WHY Oral glucose is indicated for a conscious hypoglycemic patient who is able to swallow. Aspirin is used for suspected cardiac chest pain, activated charcoal is for certain ingested poisons, and naloxone is for suspected opioid overdose — none of which apply to this presentation.

QUESTION 5

SINGLE CHOICE

A patient with a history of COPD is breathing 30 times per minute, using accessory muscles, and demonstrates pursed-lip breathing. The EMT should administer which intervention?

- ☐ A High-concentration oxygen via non-rebreather mask
- ☒ B Low-concentration oxygen via nasal cannula at 2 L/min
- ☐ C Assisted ventilation with a bag-valve mask at a high rate
- ☐ D No oxygen, as COPD patients do not require supplemental oxygen

ANSWER B

WHY Patients with COPD who are hypoxic should receive supplemental oxygen titrated to maintain SpO₂ between 94-98% (or per local protocol, often starting at low-flow 2 L/min via nasal cannula). High-concentration oxygen via non-rebreather may suppress their hypoxic respiratory drive. BVM is reserved for inadequate breathing.

QUESTION 6

SINGLE CHOICE

A patient with suspected hemorrhagic shock has a rapid, weak pulse, cool and clammy skin, and altered mental status. Which stage of shock is the patient most likely experiencing?

- ☐ A Compensated shock
- ☒ B Decompensated shock
- ☐ C Irreversible shock
- ☐ D Pre-shock

ANSWER B

WHY Decompensated shock is marked by the failure of compensatory mechanisms, resulting in hypotension, altered mental status, and signs of organ hypoperfusion. In compensated shock, the body is still maintaining perfusion and blood pressure, typically without altered mental status.

QUESTION 7

SINGLE CHOICE

During CPR on an adult cardiac arrest patient, the EMT should perform chest compressions at which rate and depth?

- ☐ A 60-80 compressions per minute at 1 inch deep
- ☒ B 100-120 compressions per minute at 2 to 2.4 inches deep
- ☐ C 120-140 compressions per minute at 3 inches deep
- ☐ D 80-100 compressions per minute at 2.5 inches deep

ANSWER B

WHY Current AHA guidelines specify chest compressions for adults at a rate of 100-120 per minute and a depth of at least 2 inches but not greater than 2.4 inches (5-6 cm). Compressions that are too slow or too shallow are less effective.

QUESTION 8

SINGLE CHOICE

Upon arrival at the scene of a multi-vehicle collision, the EMT should FIRST:

- ☐ A Begin triage of patients
- ☒ B Ensure scene safety
- ☐ C Establish command
- ☐ D Notify the receiving hospital

ANSWER B

WHY Scene safety is the first step in scene size-up. The EMT must identify and mitigate any hazards (traffic, fire, electrical, unstable vehicles, etc.) before approaching patients. Without a safe environment, rescuers can become patients themselves.

QUESTION 9

SINGLE CHOICE

An EMT is caring for a patient in shock. Which position is most appropriate for a patient without suspected spinal injury who is hypotensive and showing signs of inadequate perfusion?

- ☒ **A** Supine with legs elevated 8 to 12 inches
- ☐ **B** Trendelenburg position
- ☐ **C** Sitting upright at 90 degrees
- ☐ **D** Prone with head turned to the side

ANSWER A

WHY The shock position — supine with the legs elevated 8 to 12 inches — helps promote venous return to the heart and brain in a hypotensive patient without suspected spinal injury. The Trendelenburg position is no longer recommended because it impairs respiration and does not improve outcomes.