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39	A	B	C	D	E

PRACTICE QUESTIONS

Elsevier Remotely Proctored Exams

EMTE1

HP EMT Exit Exam V1

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for Elsevier Remotely Proctored Exams **EMTE1**, 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, **EMTE1**
- the question number
- the email address on your order

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

QUESTION 1

SINGLE CHOICE

A 45-year-old patient is found sitting upright, leaning forward, with tripod positioning and diffuse wheezing. According to the EMT initial assessment, which life threat should the EMT address FIRST?

- ☐ A Open the airway using a jaw-thrust maneuver
- ☒ B Administer high-concentration oxygen via nonrebreather mask
- ☐ C Obtain a full set of baseline vital signs
- ☐ D Perform a focused secondary assessment of breath sounds

ANSWER B

WHY The ABCs (Airway, Breathing, Circulation) prioritize airway and ventilation before secondary assessment. Tripod positioning with diffuse wheezing suggests respiratory distress, so high-concentration oxygen to support breathing comes before a full set of vitals or detailed assessment.

QUESTION 2

SINGLE CHOICE

Which oxygen delivery device is most appropriate for a patient who is breathing adequately but requires high-concentration oxygen for suspected carbon monoxide poisoning?

- ☐ A Simple face mask at 10 L/min
- ☒ B Nonrebreather mask at 10–15 L/min
- ☐ C Nasal cannula at 6 L/min
- ☐ D Venturi mask at 35%

ANSWER B

WHY A nonrebreather mask with the reservoir bag inflated at 10–15 L/min delivers the highest concentration of oxygen (up to 90–100%) to a breathing patient, which is essential in suspected CO poisoning to displace carbon monoxide from hemoglobin.

QUESTION 3

SINGLE CHOICE

An adult patient is in cardiac arrest. CPR is being performed at a compression rate of 140/min. What corrective action should the EMT take?

- ☐ A Increase the compression depth to compensate for the rapid rate
- ☐ B Continue at the current rate because adequate perfusion is maintained
- ☒ C Slow compressions to a rate of 100–120 per minute
- ☐ D Switch to a two-thumb encircling technique immediately

ANSWER C

WHY Current AHA BLS guidelines specify a compression rate of 100–120/min for adult cardiac arrest. A rate above 120/min reduces ventricular filling and coronary perfusion and is associated with worse outcomes.

QUESTION 4

SINGLE CHOICE

During the primary assessment of a trauma patient, the EMT uses the AVPU scale to evaluate mental status. What does the 'V' in AVPU represent?

- ☒ A Verbal – responds to verbal stimuli
- ☐ B Vigilant – patient is alert and aware of surroundings
- ☐ C Vascular – palpable pulse is present

ANSWER A

WHY AVPU stands for Alert, Verbal (responds to verbal stimuli), Painful (responds to painful stimuli), and Unresponsive. The 'V' specifically denotes response to verbal stimuli.

QUESTION 5

SINGLE CHOICE

A patient has a large, actively bleeding wound to the neck. Which is the MOST appropriate initial bleeding-control intervention for the EMT?

- ☐ A Apply a tourniquet 2 inches above the wound
- ☒ B Pack the wound with hemostatic gauze and apply direct pressure
- ☐ C Apply an occlusive dressing and avoid direct pressure on the neck
- ☐ D Use pressure points to compress the carotid artery

ANSWER B

WHY Neck wounds involve major vasculature but cannot have a tourniquet applied. Hemostatic gauze packing combined with direct pressure is the recommended intervention. Occlusive dressings are used once the wound is sealed (e.g., to prevent air embolism), but bleeding control comes first.

QUESTION 6

SINGLE CHOICE

Which of the following is a principle of safe ambulance operations at the scene of a motor vehicle collision?

- ☐ A Park the ambulance uphill from the incident when fuel is present
- ☒ B Position the ambulance a safe distance from the scene and angle it to provide a safety zone
- ☐ C Use warning lights only when actively transporting a patient

ANSWER B

WHY Ambulances should be parked at a safe distance from the scene, angled for visibility, and used as a barrier to protect the scene. Warning lights are used at the scene to warn approaching traffic, not only during transport.

QUESTION 7

TRUE FALSE

In most jurisdictions, the EMT is legally required to report suspected cases of child abuse encountered while providing patient care.

☒ **A** True☐ **B** False**ANSWER A**

WHY True. EMTs are mandated reporters in most U.S. states and are legally required to report suspected child abuse (and often elder abuse and domestic violence) to the appropriate authorities after providing necessary emergency care.

QUESTION 8

SINGLE CHOICE

A 62-year-old patient reports sudden, painless loss of vision in one eye, describing it as a 'curtain coming down.' Which condition is most likely responsible for these findings?

☐ **A** Acute angle-closure glaucoma☒ **B** Retinal detachment☐ **C** Anterior uveitis☐ **D** Conjunctivitis**ANSWER B**

WHY The classic description of a painless, sudden monocular vision loss described as a 'curtain' or 'shade' descending over the visual field is the hallmark presentation of retinal detachment. Acute angle-closure glaucoma typically presents with severe eye pain, a fixed mid-dilated pupil, halos around lights, and a cloudy cornea. Anterior uveitis causes photophobia and a painful red eye, and conjunctivitis causes redness, itching, and discharge without vision loss.

QUESTION 9

SINGLE CHOICE

A patient with a history of chronic kidney disease missed a scheduled dialysis session and now presents with weakness, nausea, and an irregular pulse. Which electrolyte disturbance is the EMT most likely to suspect based on this clinical picture?

- ☐ A Hyperglycemia
- ☒ B Hyperkalemia
- ☐ C Hypocalcemia
- ☐ D Hyponatremia

ANSWER B

WHY Patients who miss dialysis appointments are at high risk for hyperkalemia (elevated serum potassium) due to impaired renal excretion. Hyperkalemia commonly produces weakness, nausea, and life-threatening cardiac dysrhythmias, which explains the irregular pulse. The other listed electrolyte disturbances are not directly tied to missed dialysis in this manner.