

Acadian EMR Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. What is the primary goal of a scene size up?**
 - A. Speed**
 - B. Comfort**
 - C. Safety**
 - D. Diagnosis**

- 2. In a pediatric head injury, placing a folded towel under the shoulders helps place the head in what position?**
 - A. Align the spine**
 - B. Place head in neutral**
 - C. Elevate the chest**
 - D. Stabilize the pelvis**

- 3. For a patient with suspected spinal injuries, which airway maneuver is preferred?**
 - A. NPA**
 - B. Endotracheal tube**
 - C. Head tilt-chin lift**
 - D. Jaw-thrust maneuver**

- 4. An adult patient is having a nosebleed. You should**
 - A. Pinch the nostrils**
 - B. Tilt the head back**
 - C. Pack with cotton**
 - D. Apply ice to nose**

- 5. A contraindication of nitroglycerin is**
 - A. High blood pressure**
 - B. Low blood pressure**
 - C. Dehydration**
 - D. Tachycardia**

- 6. During an MCI which group is in charge of assessing and sorting patients?**
- A. Security**
 - B. Transport**
 - C. Triage**
 - D. Treatment**
- 7. Your patient is conscious and stable. You need to get them down 4 flights of stairs. Which device would be most appropriate to use?**
- A. Stair chair**
 - B. Stretcher**
 - C. Ambulance cot**
 - D. Gurney**
- 8. Gas exchange occurs in the**
- A. Alveoli**
 - B. Trachea**
 - C. Bronchi**
 - D. Pharynx**
- 9. To assess circulation on an infant, you would use their**
- A. Brachial pulse**
 - B. Carotid pulse**
 - C. Radial pulse**
 - D. Femoral pulse**
- 10. True or False: Multiple-casualty incidents, pediatric patients, and untimely death are considered critical incidents.**
- A. False**
 - B. True**
 - C. Sometimes**
 - D. Unknown**

Answers

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1. C
2. B
3. D
4. A
5. B
6. C
7. A
8. A
9. A
10. B

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Explanations

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1. What is the primary goal of a scene size up?

- A. Speed**
- B. Comfort**
- C. Safety**
- D. Diagnosis**

The main idea behind a scene size-up is to ensure safety for everyone involved before you begin patient care. It's about identifying and mitigating hazards at the scene—things like traffic, fire, unstable structures, weapons, or hazardous materials—and deciding if it's safe to enter, what protective gear is needed, and whether more resources are required. This quick assessment also helps determine how you'll approach the patient and whether extrication or additional help is necessary. Safety comes first because without a safe scene you can't effectively care for patients. Speed, comfort, and making a diagnosis are important in later steps, but not the goal of this initial assessment.

2. In a pediatric head injury, placing a folded towel under the shoulders helps place the head in what position?

- A. Align the spine**
- B. Place head in neutral**
- C. Elevate the chest**
- D. Stabilize the pelvis**

The situation tests how to position the head to protect the airway while keeping the neck in a stable, non-extreme alignment. Placing a folded towel under the shoulders helps bring the head into a neutral position relative to the spine. This means the head isn't tipped too far forward or backward, so the airway stays open and the cervical spine remains in alignment during assessment and care. By lifting the shoulders slightly, you allow the head to rest in a straight line with the torso, which minimizes movement at the neck and reduces the risk of worsening a potential spine injury. This approach is specifically about achieving a neutral head position for airway management and spinal protection, not about elevating the chest or stabilizing the pelvis.

3. For a patient with suspected spinal injuries, which airway maneuver is preferred?

- A. NPA**
- B. Endotracheal tube**
- C. Head tilt-chin lift**
- D. Jaw-thrust maneuver**

Minimizing neck movement while keeping the airway open is crucial when spinal injury is suspected. The jaw-thrust maneuver accomplishes this by lifting the mandible forward to move the tongue and soft tissues away from the airway without tilting or extending the neck. It allows you to open the airway quickly while maintaining manual in-line stabilization of the cervical spine, which helps protect the injured spine from further injury. This is safer in trauma than the head tilt-chin lift, which requires extending the neck and can worsen spinal injury. While a definitive airway like an endotracheal tube may ultimately be necessary, it is more invasive and involves greater manipulation and risk, and the question focuses on the initial maneuver to open the airway. Nasopharyngeal airways are sometimes used, but if facial or basal skull injuries are suspected, they can be contraindicated and do not provide the same protection against neck movement as the jaw-thrust.

4. An adult patient is having a nosebleed. You should

- A. Pinch the nostrils**
- B. Tilt the head back**
- C. Pack with cotton**
- D. Apply ice to nose**

Direct pressure on the soft part of the nose is the quickest and most effective way to stop a common adult nosebleed. The bleeding usually comes from a front area of the nasal septum where vessels are close to the surface; squeezing the nostrils compresses those vessels, helps form a clot, and reduces ongoing blood loss. Do this by sitting up and leaning slightly forward, then pinch the soft lower part of the nose with your fingers for about 5 to 10 minutes without releasing. This forward posture prevents blood from running back into the throat and helps you monitor the situation. Tilting the head back is not advised because it can cause blood to run down the throat, which may lead to coughing or choking and does not actually stop the bleeding. Packing with cotton or other materials is a more involved step and is not the first measure a layperson should take; it's typically done by a clinician if bleeding continues. Ice on the bridge of the nose can be a helpful adjunct but does not substitute for direct pressure. So, the best initial action is to pinch the nostrils to apply direct pressure and allow clotting to occur.

5. A contraindication of nitroglycerin is

- A. High blood pressure**
- B. Low blood pressure**
- C. Dehydration**
- D. Tachycardia**

Nitroglycerin works by dilating blood vessels, which lowers preload and afterload. In someone with low blood pressure, this further reduction can cause insufficient blood flow to vital organs, dizziness, fainting, or shock, so low blood pressure is a contraindication. High blood pressure isn't a contraindication because nitroglycerin can still be used to relieve chest pain in some patients with hypertension, though it requires careful monitoring. Dehydration isn't an outright contraindication, though it can contribute to low blood pressure. Tachycardia by itself isn't a contraindication, although nitroglycerin can cause some reflex tachycardia. The key safety concern is the current low blood pressure, which is why that option is the correct choice.

6. During an MCI which group is in charge of assessing and sorting patients?

- A. Security**
- B. Transport**
- C. Triage**
- D. Treatment**

In a mass casualty incident, triage is the process of rapidly assessing patients on scene and sorting them by urgency to guide who needs care first and where they should be transported. This on-scene prioritization helps maximize survivors when resources are overwhelmed. The goal isn't security or the actual medical treatment itself, but determining who needs immediate life-saving intervention, who can wait, and who has minimal chance of benefit from rapid care. Security maintains scene safety, transport moves patients according to the triage decisions, and treatment provides care after triage has categorized patients. So, the group responsible for assessing and sorting is triage.

7. Your patient is conscious and stable. You need to get them down 4 flights of stairs. Which device would be most appropriate to use?

A. Stair chair

B. Stretcher

C. Ambulance cot

D. Gurney

When moving a conscious, stable patient down multiple flights of stairs, you want a device that lets you descend safely and efficiently without heavy lifting. A stair chair is designed for this scenario: it's narrow enough to maneuver on stairs, keeps the patient seated and secured, and usually has wheels and a controlled descent mechanism so responders can guide the patient down step by step. This minimizes strain on the team and reduces the risk of losing control or injuring the patient during the descent. The other options are not ideal for stairs. A stretcher, ambulance cot, or gurney is broad, heavy, and meant for flat-surface transport; carrying one down stairs requires more people and more physical effort, increasing risk to both patient and responders. The stair chair is specifically intended for stair descents with a conscious patient, making it the best choice in this situation.

8. Gas exchange occurs in the

A. Alveoli

B. Trachea

C. Bronchi

D. Pharynx

Gas exchange happens in the alveoli, the tiny air sacs at the end of the airways. Their walls are extremely thin and wrapped in a dense network of capillaries, creating a large surface area for diffusion. Oxygen moves from the alveolar air into the blood, while carbon dioxide moves from the blood into the alveolar air to be exhaled. This exchange occurs across the respiratory membrane, which includes the alveolar epithelium (mostly Type I cells), the basement membranes, and the capillary endothelium. Surfactant produced by Type II cells reduces surface tension to keep alveoli open, helping maintain efficient diffusion. The trachea, bronchi, and pharynx are conducting airways that transport air but do not participate in gas exchange because their walls aren't thin enough and they aren't closely associated with a capillary bed.

9. To assess circulation on an infant, you would use their

A. Brachial pulse

B. Carotid pulse

C. Radial pulse

D. Femoral pulse

In infants, the brachial pulse is used to assess circulation because the brachial artery runs just beneath the skin on the inside of the upper arm, making it easy to locate and feel a pulse in a small child. This pulse provides a reliable signal of perfusion during quick assessments and CPR checks. The radial pulse is often too difficult to feel in infants due to their small vessels, the carotid pulse is more suited to older patients and can be less reliable in infants, and the femoral pulse, while usable, is less convenient for rapid checks. So, checking the brachial pulse gives the clearest, most practical indication of circulation in an infant.

10. True or False: Multiple-casualty incidents, pediatric patients, and untimely death are considered critical incidents.

A. False

B. True

C. Sometimes

D. Unknown

Understanding what counts as a critical incident in EMS helps explain why these items are classified that way. Critical incidents are events that overwhelm normal coping and have a high potential to cause psychological distress in responders, often necessitating support like critical incident stress management and debriefing. Multiple-casualty incidents involve many victims and chaotic scenes, which can be emotionally and cognitively overwhelming. Pediatric patients trigger strong protective and empathetic reactions and often raise concerns about vulnerable life stages, making the experience particularly impactful. Untimely death confronts professionals with death outside expected norms and can provoke intense grief, guilt, or moral distress. Together, these characteristics make such events classic examples of critical incidents, requiring attention to responders' mental health and follow-up. Therefore, the statement is true.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://acadianemr.examzify.com>

We wish you the very best on your exam journey. You've got this!

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