

ADULT ARC CPR/AED/ FIRST AID CERT PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://adultarccpraedfirstaid.examzify.com>



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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. How many low-dose aspirin tablets should be given to a person experiencing a heart attack?**
 - A. One
 - B. Two to four
 - C. Five to six
 - D. Ten
- 2. What should you allow to happen between the first and second breaths during CPR?**
 - A. Compress the chest for a few moments
 - B. Allow the chest to fall and the air to exit
 - C. Reassess the airway before proceeding
 - D. Deliver a third breath immediately
- 3. What type of CPR technique should you use for infants?**
 - A. One hand for chest compressions and breathe into the mouth only
 - B. Two fingers for chest compressions and cover the mouth and nose for breaths
 - C. Full chest compressions using both hands
 - D. Only rescue breaths with no compressions
- 4. What is the risk level of catching a disease while providing first aid care?**
 - A. Very high
 - B. Moderate
 - C. Very low
 - D. Unknown
- 5. How long should you continue CPR before calling for additional help?**
 - A. Until the person shows signs of life
 - B. For 1 minute
 - C. For 5 minutes
 - D. Until someone else takes over

- 6. How can you identify if someone is having a heart attack?**
- A. They will have a faint pulse
 - B. They may experience chest pain, shortness of breath, or sweating
 - C. They will likely become unconscious immediately
 - D. They will have a sudden headache
- 7. What is the initial positioning of hands for giving abdominal thrusts?**
- A. Above the person's ribs
 - B. At the person's navel
 - C. Below the person's sternum
 - D. At the center of the chest
- 8. What action should you take for someone having an asthma attack?**
- A. Encourage them to run
 - B. Help them use their inhaler and encourage slow, deep breaths
 - C. Give them water to drink
 - D. Keep them lying flat
- 9. How do you perform rescue breaths while giving CPR?**
- A. Blow into the nose and mouth simultaneously
 - B. Create a seal over the mouth, give breaths lasting 1 second each
 - C. Give continuous breaths with no pauses
 - D. Only give breaths if the person is breathing
- 10. Which of the following is a common first aid treatment for sprains?**
- A. Hot compress for pain relief
 - B. Elevation, Rest, Ice, Compression
 - C. Immediate surgery
 - D. Massage the affected area

Answers

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

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Explanations

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1. How many low-dose aspirin tablets should be given to a person experiencing a heart attack?

- A. One
- B. Two to four**
- C. Five to six
- D. Ten

Administering low-dose aspirin during a suspected heart attack is critical because it helps to thin the blood and improve blood flow to the heart. The standard practice for someone experiencing a heart attack is to give them two to four low-dose aspirin tablets. This dosage effectively helps to reduce the risk of further clotting that can worsen the heart attack. Single-dose recommendations may not provide sufficient antithrombotic effect, and higher doses could lead to increased risk of bleeding without additional benefits in heart attack scenarios. It's essential to ensure the person is not allergic to aspirin and is advised to chew the aspirin to facilitate rapid absorption. The focus is on providing effective care swiftly, which is why the correct dosage falls within the recommended range of two to four tablets.

2. What should you allow to happen between the first and second breaths during CPR?

- A. Compress the chest for a few moments
- B. Allow the chest to fall and the air to exit**
- C. Reassess the airway before proceeding
- D. Deliver a third breath immediately

Allowing the chest to fall and the air to exit between the first and second breaths during CPR is essential for effective ventilation. When you provide the first breath, it inflates the lungs and fills them with oxygen. Allowing the chest to fall after this first breath enables the air to escape, which is critical because it helps to create an appropriate environment for the second breath. If you do not allow for this exhalation, the lungs may become over-inflated with air, which can reduce the effectiveness of subsequent breaths and limit oxygen delivery to the heart and vital organs. In CPR, the process of ventilating the victim is meant to be rhythmic and calculated. By ensuring that the air has the opportunity to exit before the next breath, you are maximizing the volume of oxygen delivered with each breath and maintaining proper ventilation dynamics. Proper compression and ventilation rhythms contribute to the overall effectiveness of CPR, providing the best chance for the victim to regain circulation and adequate breathing.

3. What type of CPR technique should you use for infants?

- A. One hand for chest compressions and breathe into the mouth only
- B. Two fingers for chest compressions and cover the mouth and nose for breaths**
- C. Full chest compressions using both hands
- D. Only rescue breaths with no compressions

The technique for performing CPR on infants involves using two fingers for chest compressions and covering both the mouth and nose for breaths. This method is specifically designed for infants due to their small size and delicate structures. Using two fingers allows for precise application of pressure without causing injury. The correct placement is just below the nipple line, where the breastbone is located. It's crucial to compress the chest to a depth of about 1.5 inches at a rate of 100-120 compressions per minute. When providing rescue breaths for an infant, it is important to cover both the mouth and nose because their airway is smaller and they can easily exhale breaths if not properly sealed. The breaths should be given gently to avoid over-inflating the lungs, usually one breath every 2-3 seconds during the cycles of CPR. This approach helps to ensure that adequate circulation and oxygenation are maintained during a cardiac emergency for an infant, which is vital for their survival. Other techniques, such as using one hand or full chest compressions with both hands, are not suited for infants due to the risk of injury or inefficient delivery of compressions. Additionally, providing only rescue breaths without compressions would not be effective in scenarios where the infant's heart has

4. What is the risk level of catching a disease while providing first aid care?

- A. Very high
- B. Moderate
- C. Very low**
- D. Unknown

The correct understanding of the risk level of catching a disease while providing first aid care is that it is generally considered very low. This assessment is based on several factors, primarily the measures that first responders and care providers take to minimize risk, such as using gloves and other personal protective equipment when coming into contact with blood or bodily fluids. The risk is further mitigated when individuals follow standard precautions and practice good hygiene. Most first aid situations do not involve exposure to infectious diseases, especially if the rescuer is aware of how to protect themselves. Additionally, the likelihood of encountering someone with a transmissible disease during a first aid incident is usually low, especially in community settings where the overall prevalence may not support a high transmission risk. While some circumstances (such as emergencies involving known bloodborne pathogens) could lead to a higher risk, they are not the norm. Thus, the overall consensus in first aid training is that with appropriate precautions, the risk remains very low.

5. How long should you continue CPR before calling for additional help?

A. Until the person shows signs of life

B. For 1 minute

C. For 5 minutes

D. Until someone else takes over

The correct answer is that you should continue CPR until the person shows signs of life. This is essential because the purpose of CPR is to maintain blood flow and oxygenation to vital organs, particularly the heart and brain, until professional help arrives or the person begins to show indications of recovery. Signs of life can include movement, coughing, or the ability to breathe on their own. Continuing CPR until signs of life are present is crucial, as every moment counts in a cardiac emergency. If someone demonstrates signs of life, it indicates that they are starting to regain consciousness and that their heart may be functioning again, which allows you to stop CPR and monitor them until help arrives. Other potential intervals for CPR, such as continuing for a specific time frame like 1 or 5 minutes, are not recommended since every situation is unique. Focusing solely on a time limit may lead to unnecessary interruptions in the life-saving process. Likewise, relying on another person to take over without being certain that they are available or ready could lead to critical moments without adequate care for the person experiencing the emergency. Thus, remaining engaged in CPR until signs of life become evident is the most appropriate and effective approach.

6. How can you identify if someone is having a heart attack?

A. They will have a faint pulse

B. They may experience chest pain, shortness of breath, or sweating

C. They will likely become unconscious immediately

D. They will have a sudden headache

Identifying whether someone is having a heart attack is crucial for prompt and effective response. The most common symptoms include chest pain, shortness of breath, and sweating, which can occur as the heart muscle faces reduced blood flow. Chest pain may feel like pressure, squeezing, or a fullness, and it can radiate to other areas such as the arms, back, neck, or jaw. Shortness of breath may occur with or without chest discomfort. Sweating, often described as cold sweats, is another significant indicator. While some may assume that a faint pulse or immediate loss of consciousness are definitive signs, these situations do not represent the most common presentations of a heart attack. Additionally, a sudden headache is not a typical symptom associated with heart attacks. Understanding the primary symptoms helps in recognizing the situation swiftly and can lead to quicker medical assistance, which is vital for better outcomes.

7. What is the initial positioning of hands for giving abdominal thrusts?

- A. Above the person's ribs
- B. At the person's navel**
- C. Below the person's sternum
- D. At the center of the chest

The initial positioning of hands for giving abdominal thrusts, also known as the Heimlich maneuver, is at the person's navel. This location is optimal as it allows for proper leverage when attempting to expel an object blocking the airway. When the hands are placed just above the navel, they can generate effective upward thrusts that can force air from the lungs and push the obstruction out of the airway. This technique relies on the principle that the force creates a rapid increase in intrathoracic pressure, facilitating the expulsion of the object. It is critical to avoid positioning the hands too high, such as above the ribs or below the sternum, as this could reduce effectiveness or even cause injury, especially if the thrusts are applied incorrectly. Placing hands at the center of the chest would not provide the necessary compression to the abdomen required for this maneuver. Thus, positioning the hands at the navel is both anatomically appropriate and functionally effective for performing abdominal thrusts.

8. What action should you take for someone having an asthma attack?

- A. Encourage them to run
- B. Help them use their inhaler and encourage slow, deep breaths**
- C. Give them water to drink
- D. Keep them lying flat

The appropriate action for someone experiencing an asthma attack is to help them use their inhaler and encourage slow, deep breaths. During an asthma attack, the airways become inflamed and narrowed, making it difficult for the person to breathe. The inhaler typically contains medication that helps to open up the airways, allowing for easier airflow. Encouraging the person to take slow, deep breaths helps to calm their breathing and reduce anxiety, which can further exacerbate the situation. It's important to provide reassurance and support during an asthma attack, as panic can lead to rapid, shallow breathing that may worsen the attack. Other options such as encouraging the individual to run could increase their respiratory distress, depending on the severity of the attack. Offering water may lead to choking or does not address the immediate respiratory issue. Keeping them lying flat could restrict breathing and is not advisable during an asthmatic episode; a more upright position is generally preferred for better airflow.

9. How do you perform rescue breaths while giving CPR?

- A. Blow into the nose and mouth simultaneously
- B. Create a seal over the mouth, give breaths lasting 1 second each**
- C. Give continuous breaths with no pauses
- D. Only give breaths if the person is breathing

To perform rescue breaths effectively during CPR, creating a seal over the person's mouth and giving breaths that last around 1 second each is essential. This technique allows for an adequate amount of air to enter the lungs, ensuring that oxygen is delivered into the bloodstream. By sealing the mouth properly, you prevent air from escaping and maximize the efficacy of each breath. The timing of each breath is also critical; one second is sufficient to allow the chest to rise visibly, which indicates that the breath has been delivered correctly. It is important to allow the person's chest to fall before administering another breath, as this helps to facilitate the expulsion of carbon dioxide. While rescue breaths are crucial, they should be integrated into the rhythm of chest compressions in CPR. This balanced approach is vital because the primary goal of CPR is to maintain blood circulation and oxygenation until emergency medical services can take over.

10. Which of the following is a common first aid treatment for sprains?

- A. Hot compress for pain relief
- B. Elevation, Rest, Ice, Compression**
- C. Immediate surgery
- D. Massage the affected area

The correct answer focuses on the commonly recommended treatment for sprains, which is often summarized by the acronym R.I.C.E. (Rest, Ice, Compression, Elevation). This method is effective because it helps to reduce swelling and pain, promotes healing, and prevents further injury. Resting the affected area allows the body to begin the healing process without added strain. Ice is applied to minimize swelling and numb the pain, and it should be used intermittently to avoid skin damage. Compression, typically using an elastic bandage, helps to support the injury and reduce swelling. Elevating the injured limb above the level of the heart aids in decreasing swelling by allowing fluid to drain away from the injury site. Other options, such as using hot compresses, might worsen swelling in the acute phase of a sprain. Immediate surgery is not typically warranted for sprains unless there is a severe undisplaced fracture or complete ligament tear that would necessitate surgical intervention. Lastly, massage, while it can be beneficial in later stages of recovery to promote blood flow and relaxation, should generally be avoided immediately after a sprain as it might cause additional damage or exacerbate swelling. Thus, the R.I.C.E. method remains the go-to approach for initial treatment of spr

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://adultarccpraedfirstaid.examzify.com>

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

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