AHIP Airway, Breathing, and Circulation (ABC) Practice Test (Sample)

Study Guide

BY EXAMZIFY

Everything you need from our exam experts!

Table of Contents

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

1. How frequently should rescuer roles switch during CPR?

A. Every 1 minute to maintain effectiveness

B. Every 2 minutes to prevent fatigue

C. Every 4 minutes to ensure continuity

D. After each cycle of compressions and breaths

2. What should Mr. Anderson be told regarding his enrollment form submitted on October 10?

A. His enrollment form can be processed immediately

B. He must wait until the annual election period begins

C. He can enroll in any plan anytime

D. His submission is automatically approved

3. During a code blue, what is the first step a rescuer should take?

A. Check the patient's pulse

B. Call for additional help

C. Begin chest compressions

D. Ensure the area is safe

4. Who is eligible to enroll in a Part D plan during their initial enrollment period?

A. Anyone over 70 years old

B. Individuals turning 65 or enrolled in Part A and B

C. Only those who are unemployed

D. Individuals with private insurance only

5. What is the compression technique for a child during CPR?

A. Two hands for compressions

B. One hand for compressions

C. Use of the heel of the foot for compressions

D. Back blows followed by abdominal thrusts

6. Which of the following is a sign of effective chest compressions?

A. No movement of the chest

B. Coughing during compressions

C. Visible rise and fall of the chest

D. Decrease in heart rate

7. How can the effectiveness of CPR be measured?

A. By monitoring the patient's pulse and responsiveness

B. By recording the time taken for the procedure

C. By assessing the emotional response of bystanders

D. By measuring blood pressure before and after

8. If Garcia qualifies for a Special Election Period, what can he generally do?

A. Change his Medicare Advantage coverage once.

B. Enroll in multiple plans simultaneously.

C. Keep his existing plan without modifications.

D. Switch to Medicaid coverage.

9. What is an important consideration in the airway management of patients with suspected spinal injuries?

A. Perform a head tilt-chin lift maneuver

B. Use the jaw-thrust maneuver to preserve spinal alignment

C. Apply a cervical collar before intubation

D. Encourage the patient to cough forcefully

10. What signs could suggest a patient is in respiratory failure?

A. Increased respiratory rate and high blood pressure

B. Decreased level of consciousness and inadequate respiratory effort

C. Clear lung sounds and normal oxygen saturation levels

D. Shortness of breath and wheezing sounds

Answers

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

Explanations

1. How frequently should rescuer roles switch during CPR?

A. Every 1 minute to maintain effectiveness

B. Every 2 minutes to prevent fatigue

C. Every 4 minutes to ensure continuity

D. After each cycle of compressions and breaths

In the context of CPR, it is important to switch rescuer roles every 2 minutes to prevent fatigue. Continuous high-quality chest compressions are critical for maintaining blood flow to vital organs during cardiac arrest. Fatigue can lead to a decrease in the effectiveness of compressions, which may impair the chances of survival for the patient. Switching roles at 2-minute intervals allows each rescuer to maintain their energy levels while ensuring that compressions remain strong and effective. This practice is especially important in longer resuscitation efforts, where the risk of fatigue may increase significantly. Additionally, this interval aligns with the recommendations provided by contemporary CPR guidelines, which emphasize the importance of minimizing interruptions in compressions during the resuscitation process. Thus, establishing a routine of switching rescuers every 2 minutes enhances the overall effectiveness of CPR, making it the preferred practice.

2. What should Mr. Anderson be told regarding his enrollment form submitted on October 10?

A. His enrollment form can be processed immediately

B. He must wait until the annual election period begins

C. He can enroll in any plan anytime

D. His submission is automatically approved

Mr. Anderson should be informed that he must wait until the annual election period begins because enrollment in Medicare Advantage or prescription drug plans typically has specific window periods during which individuals can enroll or make changes to their coverage. If his enrollment form was submitted on October 10, it likely falls outside of these designated times, meaning it cannot be processed until the upcoming annual election period commences. This period is a crucial time when eligible individuals can join, switch, or drop their health plan coverage, which is why the timing of his submission is significant and requires him to wait until the allowed enrollment window opens.

3. During a code blue, what is the first step a rescuer should take?

A. Check the patient's pulse

B. Call for additional help

C. Begin chest compressions

D. Ensure the area is safe

Ensuring the area is safe is a fundamental first step during any emergency situation, including a code blue. This action is crucial because it protects both the rescuer and the patient from any potential dangers that might hinder the rescue effort. Without ensuring safety, there is a risk of further injury or complications from hazards such as falling objects, electrical issues, or crowded spaces. In a code blue scenario, the environment should be assessed to determine if it is safe to proceed with resuscitation efforts. Once safety is confirmed, the rescuer can effectively call for additional help, check the patient's pulse, or begin chest compressions as necessary. Prioritizing safety sets the groundwork for a successful response and increases the likelihood of a positive outcome for the patient.

4. Who is eligible to enroll in a Part D plan during their initial enrollment period?

A. Anyone over 70 years old

B. Individuals turning 65 or enrolled in Part A and B

C. Only those who are unemployed

D. Individuals with private insurance only

Individuals turning 65 or those who are enrolled in both Part A and Part B of Medicare are eligible to enroll in a Part D plan during their initial enrollment period. This period typically lasts for seven months, starting three months before the individual turns 65, including the month they turn 65, and extending three months after that month. The purpose of Part D is to provide prescription drug coverage to those who are eligible for Medicare, ensuring they have access to necessary medications. This option is correct because it specifically identifies those who are approaching the typical age of Medicare eligibility or who have already enrolled in Medicare parts A and B and are therefore qualified to add Part D coverage. Other groups, such as individuals over 70 or those with private insurance, do not have specific eligibility criteria for Part D enrollment based solely on those factors.

5. What is the compression technique for a child during CPR?

A. Two hands for compressions

B. One hand for compressions

C. Use of the heel of the foot for compressions

D. Back blows followed by abdominal thrusts

For children during CPR, using one hand for compressions is the recommended technique. This approach is particularly effective for smaller children, where using two hands may not be necessary or could create a risk of injury due to the child's size. By employing one hand, the rescuer can provide adequate depth and rate of compressions while maintaining control. Using one hand allows for targeted compression on the lower half of the sternum, which is critical for effective circulation during cardiac arrest. It's important to maintain a compression depth of at least one-third the depth of the chest, which typically translates to about 2 inches for children. This technique also enables the rescuer to use their other hand to support the child's head or open the airway if needed. Although two hands is often appropriate for adult CPR or larger children, and back blows with abdominal thrusts is a technique used for choking emergencies, these methods do not align with the guidelines for performing CPR specifically aimed at relieving cardiac arrest in children. Hence, the one-hand compression technique provides an effective and safe approach for performing CPR on pediatric patients.

6. Which of the following is a sign of effective chest compressions?

A. No movement of the chest

B. Coughing during compressions

C. Visible rise and fall of the chest

D. Decrease in heart rate

The visible rise and fall of the chest is a clear sign of effective chest compressions. During cardiopulmonary resuscitation (CPR), the goal of compressions is to artificially circulate blood and maintain oxygenation to vital organs. Effective compressions create sufficient pressure in the thoracic cavity, allowing blood to flow out and facilitating a return flow to the heart. This mechanical action leads to the expansion and contraction of the chest wall, which can be observed as the chest rising and falling. When this movement is noted, it generally indicates that air is being effectively pushed into the lungs, or that the heart is being adequately compressed to circulate blood throughout the body, both of which contribute to the effectiveness of CPR. In contrast, other options would not indicate effective compressions: an absence of chest movement suggests inadequate compressions, while coughing could indicate the patient is regaining some level of consciousness, and a decrease in heart rate is not a desirable outcome during CPR as the goal is to maintain perfusion.

7. How can the effectiveness of CPR be measured?

A. By monitoring the patient's pulse and responsiveness

B. By recording the time taken for the procedure

C. By assessing the emotional response of bystanders

D. By measuring blood pressure before and after

Measuring the effectiveness of CPR primarily involves monitoring the patient's pulse and responsiveness because these indicators directly reflect the status of the patient's cardiovascular system. When CPR is performed effectively, it helps restore circulation and oxygenation, which should manifest in an observable pulse and improved responsiveness over time. While recording the time taken for the procedure can be useful for understanding overall response times and efficiency, it doesn't directly measure the success of the CPR itself. Assessing the emotional response of bystanders, although highlighting important aspects of the situation, does not provide concrete information about the patient's medical status or the effectiveness of resuscitation efforts. Similarly, measuring blood pressure before and after CPR can be informative, but it is not as immediate or direct an indicator of CPR effectiveness as observing signs of circulation and neurological response. Thus, the best and most practical way to gauge how well CPR is working is through checking for a pulse and any signs of responsiveness.

8. If Garcia qualifies for a Special Election Period, what can he generally do?

A. Change his Medicare Advantage coverage once.

B. Enroll in multiple plans simultaneously.

C. Keep his existing plan without modifications.

D. Switch to Medicaid coverage.

If Garcia qualifies for a Special Election Period (SEP), he is generally allowed to change his Medicare Advantage coverage once. The Special Election Periods are designed to give beneficiaries the opportunity to make changes to their coverage that they may not have been able to do during the regular enrollment periods due to specific qualifying events, such as moving, losing other coverage, or experiencing changes in eligibility for other programs. During an SEP, beneficiaries can take advantage of the flexibility to switch plans, select a different Medicare Advantage plan, or even go back to Original Medicare if that better suits their needs. It is essential for beneficiaries like Garcia to understand that while they can generally make this change, the options available may depend on individual circumstances and the specifics of the SEP they qualify for. The options of enrolling in multiple plans simultaneously, keeping the existing plan unchanged, or switching to Medicaid coverage do not align with the typical provisions of an SEP. Enrolling in multiple plans at once would create conflicts in coverage, maintaining an existing plan without modification does not utilize the benefits of the SEP, and switching to Medicaid typically follows its own procedures, outside the scope of Medicare Advantage changes.

9. What is an important consideration in the airway management of patients with suspected spinal injuries?

A. Perform a head tilt-chin lift maneuver

B. Use the jaw-thrust maneuver to preserve spinal alignment

C. Apply a cervical collar before intubation

D. Encourage the patient to cough forcefully

The jaw-thrust maneuver is crucial in the airway management of patients with suspected spinal injuries because it allows for airway opening without compromising spinal alignment. This technique involves using the fingers to push the jaw forward while keeping the head in a neutral position, thereby minimizing any movements that could exacerbate a potential spinal injury. By using this method, healthcare providers can maintain stability in the cervical spine, reduce the risk of further injury, and still ensure that the patient's airway is clear. This distinguishes the jaw-thrust maneuver from other airway techniques that may involve positioning the head in ways that could put the spinal column at risk. For patients with suspected spinal injuries, it is vital to avoid any maneuvers that could lead to neck extension or flexion and instead use techniques that allow for effective airway management while maintaining spinal precautions.

10. What signs could suggest a patient is in respiratory failure?

A. Increased respiratory rate and high blood pressure

B. Decreased level of consciousness and inadequate respiratory effort

C. Clear lung sounds and normal oxygen saturation levels

D. Shortness of breath and wheezing sounds

A decreased level of consciousness and inadequate respiratory effort are critical indicators of respiratory failure. In respiratory failure, the body's ability to exchange gases effectively is compromised, which often leads to hypoxia (lack of oxygen) and hypercapnia (excess CO_2). A decreased level of consciousness can signify inadequate oxygen supply to the brain, while inadequate respiratory effort suggests that the patient is not breathing effectively or sufficiently, which could lead to further complications if not addressed promptly. The other options do not accurately reflect signs of respiratory failure. Increased respiratory rate and high blood pressure could indicate distress but are not definitive signs of respiratory failure on their own. Clear lung sounds and normal oxygen saturation levels suggest functioning respiratory status, which would not be consistent with respiratory failure. Shortness of breath and wheezing sounds may indicate respiratory distress but do not necessarily confirm failure without other significant findings like those mentioned in the correct answer.

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://ahipabc.examzify.com

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