

ANSON RESUSCITATION QUALITY IMPROVEMENT (RQI) PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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. If the patient is not breathing normally but has a pulse and you need rescue breaths, what is the correct ventilation rate?**
 - A. 1 breath every 2 seconds
 - B. 1 breath every 4 seconds
 - C. 1 breath every 6 seconds, or about 10 breaths per minute
 - D. 1 breath every 12 seconds
- 2. During CPR with an AED, if you are the sole rescuer and the AED indicates a shock, how many shocks should you deliver before resuming CPR?**
 - A. 2
 - B. 3
 - C. 1
 - D. 0
- 3. Why is regular calibration/maintenance of CPR feedback devices important in RQI?**
 - A. Faster data processing
 - B. User convenience
 - C. Consistency of data with no drift
 - D. Accuracy of data and feedback; prevents incorrect technique due to device drift.
- 4. Which device is used to provide positive pressure ventilation to a victim who is not breathing?**
 - A. Pocket mask
 - B. Oxygen mask
 - C. Bag-mask device
 - D. Nasal cannula
- 5. How often does RQI typically require re-demonstration of CPR skills according to standard practice?**
 - A. Every week.
 - B. Every six months.
 - C. Annually.
 - D. Regular practice with short sessions; re-demonstration intervals vary, commonly every 3 months.

- 6. What is the typical cadence for chest compressions per minute?**
- A. 60-80 compressions per minute
 - B. 100-120 compressions per minute
 - C. 80-100 compressions per minute
 - D. 140-160 compressions per minute
- 7. During single-rescuer CPR, if the AED detects a shockable rhythm and you deliver one shock, what is the recommended CPR sequence after the shock?**
- A. 30 compressions and 2 breaths
 - B. 15 compressions and 2 breaths
 - C. 10 compressions and 1 breath
 - D. 20 compressions and 4 breaths
- 8. Why is excessive ventilation a concern during CPR?**
- A. It makes the patient more alert.
 - B. It speeds up heart rate.
 - C. It increases intrathoracic pressure, reduces venous return, delays compressions, and wastes time.
 - D. It improves oxygenation in all cases.
- 9. How many compressions are delivered before the next breaths in a 30:2 cycle?**
- A. 20 compressions
 - B. 40 compressions
 - C. 50 compressions
 - D. 30 compressions
- 10. For infant CPR, which technique can be used by two rescuers?**
- A. 2 thumbs encircling hands technique in the center of the chest
 - B. Two fingers alone on the chest
 - C. Palm heel on the sternum
 - D. One hand on the back

Answers

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

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Explanations

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1. If the patient is not breathing normally but has a pulse and you need rescue breaths, what is the correct ventilation rate?

- A. 1 breath every 2 seconds
- B. 1 breath every 4 seconds
- C. 1 breath every 6 seconds, or about 10 breaths per minute**
- D. 1 breath every 12 seconds

When there is a pulse but the person isn't breathing normally, you're aiming to provide just enough ventilation to oxygenate without overdoing it. Deliver rescue breaths at about one every six seconds, which is roughly ten breaths per minute. This pace supports circulation and gas exchange without increasing intrathoracic pressure too much. Each breath should last about one second and cause the chest to rise, then you pause briefly to let exhalation happen before the next breath. Maintain this rate until the person starts breathing on their own, a stronger pulse is detected, or professional help arrives.

2. During CPR with an AED, if you are the sole rescuer and the AED indicates a shock, how many shocks should you deliver before resuming CPR?

- A. 2
- B. 3
- C. 1**
- D. 0

When you're the sole rescuer using an AED during CPR, and the AED directs a shock, you deliver a single shock and then immediately resume CPR. Giving just one shock minimizes the interruption to chest compressions, which are essential for maintaining blood flow during cardiac arrest. After delivering that one shock, start rescuers' high-quality CPR right away (continue with chest compressions at a rate of about 100–120 per minute and a depth of about 2 inches/5 cm for adults) and let the AED reanalyze after the next complete CPR cycle (roughly every 2 minutes). Delivering additional shocks without resuming compressions would unnecessarily delay perfusion; thus a single shock followed by immediate resumption of CPR is the best approach.

3. Why is regular calibration/maintenance of CPR feedback devices important in RQI?

- A. Faster data processing
- B. User convenience
- C. Consistency of data with no drift
- D. Accuracy of data and feedback; prevents incorrect technique due to device drift.**

Regular calibration and maintenance keep CPR feedback readings accurate and reliable over time, preventing sensor drift from distorting guidance. These devices measure metrics like compression depth, rate, and recoil, and small changes in sensors, temperature, or battery can gradually shift what the readings reflect. Calibrating realigns measurements with standardized references, while maintenance keeps hardware and software functioning correctly, so the feedback you receive truly represents your actual performance. This accuracy is crucial for reinforcing proper technique and for producing trustworthy data used in ongoing RQI quality improvement. While faster processing or convenience are helpful, they don't address the real risk of drift or the need for correct, consistent feedback.

4. Which device is used to provide positive pressure ventilation to a victim who is not breathing?

- A. Pocket mask
- B. Oxygen mask
- C. Bag-mask device**
- D. Nasal cannula

Providing breaths for someone who isn't breathing requires delivering positive pressure ventilation. The bag-mask device is designed for this: it combines a face mask with a squeezable bag and an oxygen reservoir. When you compress the bag, air is pushed into the lungs under positive pressure, and the reservoir lets you deliver larger breaths with higher oxygen concentration if attached to oxygen. This setup gives you reliable tidal volumes and better chest rise, which are essential for effective ventilation during resuscitation. A pocket mask can deliver breaths but lacks the reservoir, making consistent volumes harder and less efficient, especially in adults or longer CPR. An oxygen mask and a nasal cannula deliver oxygen but do not provide breaths themselves, so they don't ventilate a non-breathing victim.

5. How often does RQI typically require re-demonstration of CPR skills according to standard practice?

- A. Every week.
- B. Every six months.
- C. Annually.
- D. Regular practice with short sessions; re-demonstration intervals vary, commonly every 3 months.**

The key idea is that CPR skills in RQI are kept fresh through ongoing, brief practice rather than a once-a-year check. This approach combats rapid skill decay by providing regular, short practice sessions with feedback. Because the exact timing of re-demonstrations can depend on the specific program or facility, many RQI implementations use a quarterly cadence. So the best answer reflects both the regular, short practice and the commonly used interval of about every three months. The other options imply fixed, longer gaps (weekly, semiannual, or annual), which don't align with the RQI emphasis on frequent, ongoing maintenance.

6. What is the typical cadence for chest compressions per minute?

- A. 60-80 compressions per minute
- B. 100-120 compressions per minute**
- C. 80-100 compressions per minute
- D. 140-160 compressions per minute

The typical cadence for chest compressions during CPR is about 100–120 compressions per minute. This pace balances delivering enough rapid compressions to sustain blood flow with allowing full chest recoil between compressions, which is essential for venous return and coronary perfusion. Going slower can reduce perfusion, while going faster can compromise compression depth and recoil. In practice, rescuers often use a metronome or a song around 100–120 beats per minute to stay on tempo.

7. During single-rescuer CPR, if the AED detects a shockable rhythm and you deliver one shock, what is the recommended CPR sequence after the shock?

- A. 30 compressions and 2 breaths
- B. 15 compressions and 2 breaths
- C. 10 compressions and 1 breath
- D. 20 compressions and 4 breaths

After delivering a shock in single-rescuer CPR for an adult with a shockable rhythm, the focus is to restore perfusion quickly by resuming chest compressions and ventilations without delay. The recommended sequence is to perform 30 chest compressions, then give 2 rescue breaths, and repeat these cycles. This 30:2 pattern strikes a balance between circulating blood to vital organs and providing enough oxygenation through breaths, while keeping interruptions to a minimum so perfusion is maintained. The AED will typically recheck rhythm and advise the next shock after the current CPR cycle completes, continuing cycles until help arrives or the scene changes. The alternative ratios are not used in this single-rescuer adult scenario.

8. Why is excessive ventilation a concern during CPR?

- A. It makes the patient more alert.
- B. It speeds up heart rate.
- C. It increases intrathoracic pressure, reduces venous return, delays compressions, and wastes time.
- D. It improves oxygenation in all cases.

During CPR, the priority is continuous, high-quality chest compressions to maintain blood flow to the heart and brain. Breathing too much or too often raises intrathoracic pressure with each breath, which makes it harder for blood to return to the heart between compressions. That reduces venous return and lowers the perfusion pressures CPR depends on. It also interrupts compressions more than necessary, wasting time that could be used to pump blood. While giving breaths is important, overdoing it can worsen outcomes by both decreasing the effectiveness of compressions and delaying them. Oxygenation isn't guaranteed to improve when perfusion is the limiting factor, so excessive ventilation can do more harm than good.

9. How many compressions are delivered before the next breaths in a 30:2 cycle?

- A. 20 compressions
- B. 40 compressions
- C. 50 compressions
- D. 30 compressions

The key idea is the rhythm of CPR cycles. In a 30:2 setup, you deliver 30 chest compressions in a row, then pause to give 2 breaths, and repeat. This ratio balances blood flow with ventilation, aiming to maintain circulation while providing oxygenation. Therefore, the number of compressions before the next breaths is 30. Other numbers would reflect different cycle formats and aren't the standard 30:2 rhythm for adult single-rescuer CPR.

10. For infant CPR, which technique can be used by two rescuers?

A. 2 thumbs encircling hands technique in the center of the chest

B. Two fingers alone on the chest

C. Palm heel on the sternum

D. One hand on the back

When two rescuers do infant CPR, the technique to use is the two-thumb-encircling hands method. One rescuer wraps their arms around the infant's chest from behind, placing both thumbs on the center of the chest (the sternum) while the fingers encircle the back to stabilize. This arrangement lets both thumbs drive the compressions with consistent depth and allows the other rescuer to manage breaths or switch roles smoothly, promoting continuous, high-quality compressions and reducing fatigue. The alternative of using two fingers on the chest is what a single rescuer typically uses, not the two-rescuer approach. A palm heel on the sternum or one hand on the back isn't the standard method for infant chest compressions with two rescuers, as they don't provide the proper leverage and control needed for effective compressions.

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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://ansonrqi.examzify.com>

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

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