

ASATT National Certification Exam (NCE) Practice Exam (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 one of the primary concerns regarding the use of donated blood products?**
 - A. Cost-effectiveness**
 - B. Quality of care**
 - C. Religious objections**
 - D. Assessment of genetic compatibility**

- 2. What characteristic should the light source of a laryngoscope have during setup?**
 - A. It should be dim**
 - B. It should be intermittent**
 - C. It should be bright**
 - D. It should be adjustable**

- 3. Which type of anesthesia requires the use of a double lumen tube?**
 - A. General anesthesia**
 - B. Regional anesthesia**
 - C. Monitored anesthesia care**
 - D. Local anesthesia**

- 4. Which of the following conditions may lead to pulmonary embolism during CVP placement?**
 - A. Deep vein thrombosis**
 - B. Catheter misplacement**
 - C. Pneumothorax**
 - D. Arterial injury**

- 5. Which device must be sterile before use?**
 - A. Pulmonary artery catheter**
 - B. Infusion pump**
 - C. Thermometer**
 - D. Stethoscope**

- 6. A cardiac monitor shows a premature ventricular contraction occurring every other beat. What is this pattern called?**
- A. Trigeminy**
 - B. Bigeminy**
 - C. Quadrigeminy**
 - D. Normal sinus rhythm**
- 7. If a vacuum regulator is used during blood collection in a blood salvage device, where should it be placed?**
- A. Between the blood collection reservoir and the patient**
 - B. Directly connected to the syringe**
 - C. Between the blood collection reservoir and the vacuum source**
 - D. At the end of the collection tube**
- 8. Which anesthetic technique involves the use of a drug administered to the subarachnoid space?**
- A. Topical anesthesia**
 - B. General anesthesia**
 - C. Spinal anesthesia**
 - D. Peripheral nerve block**
- 9. What is the most common cause of hypotension in a trauma patient?**
- A. Medication effects**
 - B. Cardiac arrest**
 - C. Hypovolemia**
 - D. Sepsis**
- 10. Which of the following procedures requires a sterile set-up?**
- A. Cholecystectomy**
 - B. Radial a-line placement**
 - C. IV insertion**
 - D. Chest X-ray**

Answers

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

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Explanations

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1. What is one of the primary concerns regarding the use of donated blood products?

- A. Cost-effectiveness**
- B. Quality of care**
- C. Religious objections**
- D. Assessment of genetic compatibility**

One of the primary concerns regarding the use of donated blood products involves the potential for religious objections. Certain faiths and beliefs may prohibit the acceptance of blood transfusions or the use of blood products. For instance, Jehovah's Witnesses generally refuse blood transfusions on the grounds that it conflicts with their religious beliefs, which can lead to complications in medical settings where a blood transfusion might be necessary. Understanding these objections is crucial for healthcare providers to respect patients' rights and make informed decisions regarding their care options. While cost-effectiveness, quality of care, and assessment of genetic compatibility are also important factors in the context of blood transfusions and therapies, they do not directly highlight the ethical and personal dimensions that come into play with religious beliefs. Addressing religious concerns ensures that patient autonomy is honored and that medical support aligns with the patient's values and beliefs.

2. What characteristic should the light source of a laryngoscope have during setup?

- A. It should be dim**
- B. It should be intermittent**
- C. It should be bright**
- D. It should be adjustable**

A laryngoscope is an essential tool for visualizing the larynx and performing intubation. The light source of a laryngoscope plays a critical role in illuminating the airway, allowing for clear visualization of the structures involved. A bright light source is essential during setup because it enhances visibility when using the laryngoscope. Proper illumination helps the clinician see anatomical landmarks and navigate the airway effectively, which is especially important in situations where visibility may be compromised due to the patient's anatomy or any other factors such as blood or secretions. While dim light might make it difficult to see the larynx clearly, and intermittent light could disrupt the procedure, leading to potential delays or complications, an adjustable light source might provide flexibility but does not prioritize the immediate need for sufficient brightness during the setup process. Thus, the most critical characteristic for the light source is that it should be bright, ensuring optimal conditions for successful laryngoscopy.

3. Which type of anesthesia requires the use of a double lumen tube?

- A. General anesthesia**
- B. Regional anesthesia**
- C. Monitored anesthesia care**
- D. Local anesthesia**

The use of a double lumen tube is specifically associated with general anesthesia, particularly in procedures that may require selective lung ventilation or in surgeries involving the thoracic cavity. A double lumen tube allows for independent ventilation of each lung, which can be crucial in surgeries that involve the heart, major blood vessels, or one lung. In general anesthesia, the patient is rendered completely unconscious and unable to feel pain. This state necessitates robust airway management, which includes the potential need for such advanced airway devices as a double lumen tube. This provides the anesthesiologist with greater control over the patient's airway and ventilation during complex surgical procedures. Regional anesthesia, monitored anesthesia care (MAC), and local anesthesia generally do not require the use of a double lumen tube. Regional anesthesia blocks nerves in a specific area of the body, while MAC involves sedation but allows the patient to maintain their airway. Local anesthesia numbs a small area of tissue and typically does not involve any advanced airway management techniques.

4. Which of the following conditions may lead to pulmonary embolism during CVP placement?

- A. Deep vein thrombosis**
- B. Catheter misplacement**
- C. Pneumothorax**
- D. Arterial injury**

Deep vein thrombosis (DVT) is a condition that can significantly increase the risk of pulmonary embolism (PE) during central venous pressure (CVP) placement. When a DVT occurs, a blood clot forms in the deep veins, often in the legs. If the CVP placement involves manipulation or movement of the venous system, or if the placement is in a position that facilitates the dislodgment of the clot, there is a potential for that clot to travel through the venous system. If the clot travels to the lungs, it can cause a pulmonary embolism, which can lead to serious complications, including respiratory distress or even death. In contrast, catheter misplacement, pneumothorax, and arterial injury, while they can lead to significant complications, do not directly contribute to the risk of pulmonary embolism. Catheter misplacement may cause serious local complications or placement in an undesirable vascular structure. Pneumothorax results from lung puncture, leading to air entering the pleural space and potentially causing difficulty in breathing. Arterial injury involves damage to an artery during the procedure, which can lead to bleeding or hematoma formation, but not specifically to pulmonary embolism. Understanding these distinctions is critical for assessing

5. Which device must be sterile before use?

A. Pulmonary artery catheter

B. Infusion pump

C. Thermometer

D. Stethoscope

A pulmonary artery catheter must be sterile before use because it is an invasive device used to monitor the pressure within the pulmonary artery and the heart's function. Any non-sterile introduction of this catheter can lead to serious complications, such as infections or sepsis, as it enters the bloodstream. Ensuring that this device is sterile is paramount to patient safety, particularly since it involves direct access to the cardiovascular system. In contrast, an infusion pump, although it must be used in a clean environment and properly maintained, does not need to be sterile itself as it is an external device that doesn't directly enter the body. A thermometer, used for measuring body temperature, typically requires only to be disinfected rather than sterilized, particularly in non-invasive cases. A stethoscope is a diagnostic tool that is usually cleaned between patients but does not need to be sterile since it does not penetrate the skin or enter the sterile body compartments.

6. A cardiac monitor shows a premature ventricular contraction occurring every other beat. What is this pattern called?

A. Trigeminy

B. Bigeminy

C. Quadrigeminy

D. Normal sinus rhythm

The pattern described, where a premature ventricular contraction (PVC) occurs every other beat, is referred to as bigeminy. Bigeminy specifically indicates that there is a regular alternating pattern of a normal beat followed by a PVC. This is characterized by the sequence of a normal heartbeat (also known as a sinus beat) followed by a PVC, which creates a repetitive cycle of two beats. In contrast, trigeminy would denote a situation where a PVC occurs after every two normal beats, meaning you would see a normal beat followed by a normal beat and then a PVC repeatedly. Quadrigeminy involves a PVC occurring after every three normal beats. Normal sinus rhythm, on the other hand, refers to a stable rhythm of heartbeats originating from the sinoatrial (SA) node without the presence of ectopic beats like PVCs. Thus, identifying the correct term for the heart's rhythm pattern involves understanding how frequently the PVCs occur relative to the normal sinus beats, which in this case is captured accurately by the term bigeminy.

7. If a vacuum regulator is used during blood collection in a blood salvage device, where should it be placed?

A. Between the blood collection reservoir and the patient

B. Directly connected to the syringe

C. Between the blood collection reservoir and the vacuum source

D. At the end of the collection tube

The vacuum regulator plays a crucial role in controlling the suction applied during the blood collection process in a blood salvage device. It is essential to place the vacuum regulator between the blood collection reservoir and the vacuum source. This positioning allows the regulator to effectively manage the negative pressure being exerted on the blood collection reservoir, ensuring that the suction is adequate to collect blood without causing harm to the patient or creating excessive vacuum which could lead to hemolysis or damage to red blood cells. By controlling the vacuum pressure, the regulator helps maintain a safe and effective rate of blood collection, and by being placed closest to the vacuum source, it ensures that any adjustments made to the suction are directly affecting the system's performance without fluctuations from other components. This setup provides a controlled environment for collecting blood safely and efficiently, thereby enhancing the functionality of the blood salvage system.

8. Which anesthetic technique involves the use of a drug administered to the subarachnoid space?

A. Topical anesthesia

B. General anesthesia

C. Spinal anesthesia

D. Peripheral nerve block

Spinal anesthesia is a technique that involves the administration of anesthetic drugs directly into the subarachnoid space, which is located beneath the arachnoid membrane and around the spinal cord. This method allows for the delivery of anesthetic agents to the cerebrospinal fluid, resulting in rapid onset of anesthesia from the waist down, including the pelvic region and lower limbs. It is particularly useful for surgeries on the lower parts of the body, such as orthopedic procedures on the legs or cesarean sections. The key aspect of spinal anesthesia is its ability to provide dense and reliable sensory and motor blockade due to the close proximity of the drug to the spinal cord nerve roots. This technique is distinct from topical anesthesia, which numbs a specific area of the skin, and from general anesthesia, which involves rendering the entire body unconscious. Peripheral nerve blocks target specific nerves to block sensation to certain areas, but do not involve the administration of drugs into the subarachnoid space. Thus, spinal anesthesia is uniquely positioned as the correct answer to this question.

9. What is the most common cause of hypotension in a trauma patient?

- A. Medication effects**
- B. Cardiac arrest**
- C. Hypovolemia**
- D. Sepsis**

Hypovolemia is recognized as the most common cause of hypotension in trauma patients due to the significant loss of blood volume that often occurs during traumatic events. When trauma occurs, especially with injuries that result in severe bleeding—such as from lacerations, fractures, or internal injuries—there is a decrease in the circulating blood volume. This reduction in volume leads to lower venous return to the heart, resulting in decreased cardiac output and, consequently, hypotension. In the context of trauma, addressing hypovolemia is critical, as it is a direct consequence of the injury and can lead to shock if not managed promptly. Treatment typically involves fluid resuscitation and, in some cases, blood transfusions to restore blood volume and stabilize blood pressure. Other potential causes of hypotension in trauma patients, such as medication effects, cardiac arrest, and sepsis, can certainly contribute to low blood pressure in different contexts. However, in the immediate aftermath of traumatic injury, hypovolemia due to blood loss is the predominant factor that clinicians must consider when evaluating a patient's hemodynamic stability.

10. Which of the following procedures requires a sterile set-up?

- A. Cholecystectomy**
- B. Radial a-line placement**
- C. IV insertion**
- D. Chest X-ray**

The procedure that requires a sterile setup is radial a-line placement. This procedure involves inserting an arterial line into the radial artery for continuous blood pressure monitoring and obtaining arterial blood samples. Maintaining sterility is crucial in this context to reduce the risk of introducing pathogens that could lead to infection, especially since the procedure involves accessing the bloodstream directly. In surgical settings, such as cholecystectomy, a sterile environment is also essential, but this specific question focuses on the most direct and immediate requirement for sterilization in non-operating room procedures. While intravenous (IV) insertion can be performed with a focus on aseptic technique, it does not necessitate the same stringent sterility as an arterial line placement, where a more controlled sterile field is essential to prevent complications. Likewise, a chest X-ray is a diagnostic imaging procedure that does not require any sterile setup.

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://asattnce.examzify.com>

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

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