Basic Life Support (BLS) 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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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. What is the crucial step in the Chain of Survival after calling for emergency help?

A. Initiating CPR

B. Using the AED

C. Monitoring the victim's condition

D. Giving rescue breaths only

2. What is the preferred technique for giving rescue breaths to an infant?

A. Mouth-to-nose

B. Mouth-to-mouth-and-nose

C. Bag-mask ventilation

D. Finger sweeps

3. How often should rescue breaths be delivered during CPR when using an endotracheal tube?

A. Every 5 seconds

B. Every 10 seconds

C. Every 6 seconds

D. Every 2 seconds

4. To ensure high-quality CPR is administered to a 5-year-old child, what is the appropriate chest compression depth?

A. About 1 inch

B. About 2 inches

C. About 3 inches

D. About 1.5 inches

5. What is the correct rate of ventilation delivery for a child in respiratory arrest?

A. 1 ventilation every 1 to 2 seconds

B. 1 ventilation every 2 to 3 seconds

C. 1 ventilation every 3 to 5 seconds

D. 1 ventilation every 5 to 10 seconds

6. What is the proper action for the team when the AED is analyzing?

A. Continue CPR

B. Clear the patient

C. Check for a pulse

D. Administer oxygen

7. When initiating CPR on a 15-month-old patient, which guideline should you follow?

A. Use adult CPR techniques

B. Follow the child CPR guidelines

C. Apply AED pads on both sides of the chest

D. Perform CPR as if the patient were an infant

8. If a victim of cardiac arrest has an implanted pacemaker or defibrillator, what should you avoid?

A. Using high-voltage equipment nearby

B. Placing the AED pad directly over the implanted device

C. Performing CPR without assistance

D. Giving rescue breaths

9. After Jenna performs 30 chest compressions, what should her team do next?

A. Open the patient's mouth and look for an object

B. Give 2 rescue breaths

C. Take a moment to reassess the patient

D. Perform abdominal thrusts

10. In the event of an obstructed airway, what action should be taken first for an unresponsive 9-month-old infant?

A. Begin rescue breaths

B. Provide 30 chest compressions

C. Perform back blows

D. Administer first aid

Answers

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

Explanations

1. What is the crucial step in the Chain of Survival after calling for emergency help?

A. Initiating CPR

B. Using the AED

C. Monitoring the victim's condition

D. Giving rescue breaths only

Initiating CPR is the crucial step in the Chain of Survival following the call for emergency help because it helps to restore oxygenated blood flow to the brain and other vital organs during cardiac arrest. Immediate CPR is essential for increasing the chances of survival until professional medical personnel arrive. When effective chest compressions are delivered, they can maintain some blood circulation, buying critical time for the victim. This intervention is key, as the heart may not be pumping adequately, and the brain starts to suffer irreversible damage within minutes without oxygen. By performing CPR promptly, bystanders can significantly improve the victim's outcomes. Following the initiation of CPR, using an AED becomes important, as it can restore a normal rhythm to the heart in certain cases. However, delivering chest compressions is the immediate priority to ensure blood flow is maintained. Monitoring the victim's condition and providing rescue breaths are also part of the CPR process, but the initial action that is deemed crucial in the Chain of Survival is the initiation of CPR.

2. What is the preferred technique for giving rescue breaths to an infant?

A. Mouth-to-nose

B. Mouth-to-mouth-and-nose

C. Bag-mask ventilation

D. Finger sweeps

The preferred technique for giving rescue breaths to an infant is mouth-to-mouth-and-nose. This method is effective because it allows for the delivery of air directly into the baby's airway while minimizing the risk of air escaping. Infants have small mouth and airway openings, so covering both the mouth and nose ensures a better seal and provides adequate ventilation. Using this technique, the rescuer can create a tight seal over the infant's mouth and nose, which helps to ensure that the breaths are properly directed into the lungs. This is essential, as infants have a higher respiratory rate and smaller lung volume, making effective ventilation critical in cases of respiratory distress or arrest. In contrast, mouth-to-nose, bag-mask ventilation, and finger sweeps are less appropriate for rescue breaths in infants. Mouth-to-nose may not provide sufficient air delivery since it excludes the mouth, while bag-mask ventilation requires special equipment that may not be readily available in all situations. Finger sweeps, on the other hand, are used to clear an obstructed airway rather than to deliver breaths.

3. How often should rescue breaths be delivered during CPR when using an endotracheal tube?

A. Every 5 seconds

B. Every 10 seconds

C. Every 6 seconds

D. Every 2 seconds

Rescue breaths delivered during CPR when using an endotracheal tube should occur every 6 seconds. This frequency is based on the guidelines that emphasize the importance of providing adequate ventilation while also allowing time for chest compressions. The 6-second interval allows for sufficient oxygen delivery to the lungs without interrupting the circulation too frequently, which is critical to maintaining blood flow to vital organs during CPR. In the context of CPR effectiveness, the balance between chest compressions and ventilations is essential; compressions should remain the priority, but adequate breaths must also be provided. This interval supports the physiological need for oxygen and helps prevent potential complications associated with providing breaths too quickly, such as hyperventilation.

4. To ensure high-quality CPR is administered to a 5-year-old child, what is the appropriate chest compression depth?

A. About 1 inch

B. About 2 inches

C. About 3 inches

D. About 1.5 inches

For a 5-year-old child, the appropriate chest compression depth during CPR is about 2 inches. This depth is recommended to ensure that compressions are effective in generating adequate blood flow to vital organs, particularly the heart and brain. It is crucial to compress the chest firmly and deeply enough to allow for complete recoil between compressions, thereby maintaining blood circulation during the resuscitation efforts. This recommendation is part of the guidelines provided by organizations such as the American Heart Association, which emphasize the importance of depth and rate during CPR. Compressions that are too shallow may not effectively circulate blood, which can lead to poorer outcomes. By compressing to about 2 inches, caregivers can better ensure that they are meeting the necessary criteria for high-quality CPR, thus enhancing the chances of survival and recovery for the child.

5. What is the correct rate of ventilation delivery for a child in respiratory arrest?

A. 1 ventilation every 1 to 2 seconds

B. 1 ventilation every 2 to 3 seconds

C. 1 ventilation every 3 to 5 seconds

D. 1 ventilation every 5 to 10 seconds

The correct rate of ventilation delivery for a child in respiratory arrest is one ventilation every 2 to 3 seconds. This rate allows for an adequate exchange of oxygen and carbon dioxide, which is critical for preventing hypoxia in the child. When delivering ventilations, the goal is to ensure that the breaths are effective, resulting in visible rise and fall of the chest. The timing of every 2 to 3 seconds aligns with the recommendation for pediatric patients, as it provides a balance between delivering sufficient breaths while allowing adequate time for the lungs to inflate and deflate properly without causing overventilation, which can lead to complications such as barotrauma or hyperventilation. In contrast, more rapid ventilations, such as one every 1 second, may be too fast for a child and can potentially lead to issues like inadequate oxygenation or increased intrathoracic pressure. Ventilating every 3 to 5 seconds or every 5 to 10 seconds may not provide enough breaths to maintain oxygenation and could result in hypoxia. Thus, the chosen rate of 2 to 3 seconds strikes a proper balance for safely managing respiratory arrest in children.

6. What is the proper action for the team when the AED is analyzing?

A. Continue CPR

B. Clear the patient

C. Check for a pulse

D. Administer oxygen

When the AED is analyzing the heart rhythm, it is crucial to ensure that no one is in physical contact with the patient. This is because any movement or electrical interference from a person touching the patient could affect the analysis and potentially lead to an inaccurate reading. Clearing the patient ensures that the AED can properly assess the heart's rhythm without distractions or interruptions. Continuing CPR during the analysis is not advised, as it could interfere with the AED's ability to analyze effectively. Checking for a pulse at this time is not appropriate since the AED's analysis takes precedence in a cardiac arrest situation, and administering oxygen would also be irrelevant during the AED analysis phase. Therefore, the proper action is to clear the patient to ensure a safe and accurate assessment by the AED.

7. When initiating CPR on a 15-month-old patient, which guideline should you follow?

A. Use adult CPR techniques

B. Follow the child CPR guidelines

C. Apply AED pads on both sides of the chest

D. Perform CPR as if the patient were an infant

Following the child CPR guidelines is appropriate when performing CPR on a 15-month-old patient. At this age, the child falls into the category of a "child" rather than an "infant," but there are specific adaptations in the technique when applying CPR to provide the safest and most effective care for this age group. For child CPR, you typically use one hand for chest compressions and aim for a compress depth of about one-third the depth of the chest (approximately 1.5 inches). The ratio of compressions to breaths also follows a standardized method, which is typically 30 compressions followed by 2 breaths for a single rescuer. Using adult CPR techniques would not align with the anatomical and physiological differences present in a child's body, especially regarding chest compression depth and technique. While applying AED pads, placing them on both sides of the chest would not be advisable for a child of this age, as specific placement guidelines for the pediatric population are best followed. Performing CPR as if the patient were an infant might lead to ineffective compression depth and rate, given the differences in size and anatomical structure between infants and toddlers. Thus, adhering to the child CPR guidelines ensures that the rescuer is providing the most effective care tailored to

8. If a victim of cardiac arrest has an implanted pacemaker or defibrillator, what should you avoid?

A. Using high-voltage equipment nearby

B. Placing the AED pad directly over the implanted device

C. Performing CPR without assistance

D. Giving rescue breaths

When dealing with a victim of cardiac arrest who has an implanted pacemaker or defibrillator, it is crucial to position the AED pads appropriately. Placing the AED pad directly over the implanted device can interfere with its function. AED pads should instead be placed at least one inch away from the device to ensure that the electric shock delivered by the AED can effectively establish a normal heart rhythm without damaging the device itself or affecting its operation. In terms of other considerations, while using high-voltage equipment nearby is generally a safety precaution, it is not as specific to the action taken when an implanted device is present. Performing CPR is critical, and it can be done regardless of the presence of a pacemaker or defibrillator, so assistance is not a barrier to performing high-quality CPR. Lastly, giving rescue breaths can be performed, and it is recommended based on the patient's condition; thus, it is not an action to avoid based on the presence of an implanted device.

9. After Jenna performs 30 chest compressions, what should her team do next?

A. Open the patient's mouth and look for an object

B. Give 2 rescue breaths

C. Take a moment to reassess the patient

D. Perform abdominal thrusts

The correct action following 30 chest compressions in the context of Basic Life Support (BLS) is to perform 2 rescue breaths. Chest compressions are a vital component of cardiopulmonary resuscitation (CPR), and they are followed by rescue breaths in a typical cycle when someone is unresponsive and not breathing. After completing the compressions, the goal is to provide oxygen to the person's lungs while continuing to maintain blood circulation through chest compressions. Giving rescue breaths helps to deliver oxygen to the lungs, which is crucial for maintaining oxygenation of vital organs until emergency medical services (EMS) arrive or the person begins to breath on their own. Opening the patient's mouth to look for an object would typically only be appropriate if the person is choking and there is reason to believe that there is an obstruction affecting their ability to breathe. This is not the immediate next step after performing compressions. Taking a moment to reassess the patient could be important in some contexts of care, but in the specific rhythm of CPR, the sequence is clear: you perform compressions followed by breaths, not reassessment. Performing abdominal thrusts is also specific to choking situations, where there is an obstruction in the airway. In the context of standard

10. In the event of an obstructed airway, what action should be taken first for an unresponsive 9-month-old infant?

A. Begin rescue breaths

B. Provide 30 chest compressions

C. Perform back blows

D. Administer first aid

In the case of an unresponsive 9-month-old infant with an obstructed airway, the most appropriate first action is to provide 30 chest compressions. This is crucial because chest compressions can help create pressure in the chest cavity, potentially expelling the object causing the obstruction. During infancy, the airway is smaller and more delicate, so emphasis is placed on chest compressions to both maintain circulation and attempt to dislodge the obstruction. While delivering rescue breaths is important in the event of respiratory failure, an unresponsive infant requires immediate actions that target the obstructed airway first. Back blows can be effective in conscious infants but are not the recommended first step when dealing with an unresponsive child. First aid is a broad term and does not specify the immediate protocol needed for an obstructed airway, which necessitates specific actions such as chest compressions to rapidly address the situation.

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://basiclifesupport.examzify.com

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