

# 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. 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. Which site is considered the best for checking the pulse of an unresponsive adult?**
  - A. Radial artery**
  - B. Popliteal artery**
  - C. Brachial artery**
  - D. Carotid artery**
  
- 2. Which action is an example of critical thinking in a BLS team during cardiac arrest?**
  - A. Following protocol without assessment**
  - B. Determining actions based on assessment findings**
  - C. Only focusing on compressions**
  - D. Waiting for instructions without reassessing**
  
- 3. What is the recommended ratio of compressions to breaths for adult CPR?**
  - A. 15:1**
  - B. 30:2**
  - C. 5:1**
  - D. 20:2**
  
- 4. During what scenario is it crucial to determine whether additional help is needed?**
  - A. When providing routine care**
  - B. During a visual assessment of a collapsed patient**
  - C. When cleaning the area after an incident**
  - D. While conducting a patient survey**
  
- 5. Which step should Vickie take first when using an AED?**
  - A. Turn on the AED**
  - B. Attach the AED pads**
  - C. Start CPR immediately**
  - D. Call for emergency assistance**

- 6. If a child with an obstructed airway becomes unresponsive, what should you do first?**
- A. Immediately start providing rescue breaths**
  - B. Call for emergency medical assistance**
  - C. Gently lower the child to the ground and begin CPR**
  - D. Attempt back blows and abdominal thrusts**
- 7. In respiratory arrest care for an adult, what is the recommended frequency of ventilations?**
- A. 1 ventilation every minute**
  - B. 1 ventilation every 2 seconds**
  - C. 1 ventilation every 6 seconds**
  - D. 1 ventilation every 10 seconds**
- 8. During the rapid assessment, what should you scan for?**
- A. Signs of emotional distress**
  - B. Specific allergies**
  - C. Blood and other signs or symptoms**
  - D. Previous medical history**
- 9. What is the maximum amount of time you should spend checking for breathing and a pulse?**
- A. No more than 10 seconds**
  - B. No more than 30 seconds**
  - C. No more than 5 seconds**
  - D. No more than 15 seconds**
- 10. What should you do if the Team Leader asks you to perform a skill you are not comfortable with during resuscitation?**
- A. Attempt it anyway**
  - B. Ask for a demonstration**
  - C. Inform the Team Leader of your limits**
  - D. Wait and see if someone else volunteers**



## Answers

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

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## **Explanations**

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**1. Which site is considered the best for checking the pulse of an unresponsive adult?**

- A. Radial artery**
- B. Popliteal artery**
- C. Brachial artery**
- D. Carotid artery**

The carotid artery is the most appropriate site for checking the pulse of an unresponsive adult because it is located in the neck, making it easily accessible even in situations where the person is lying down or otherwise positioned in a way that might obscure other pulse points. In emergencies, the carotid artery is highly reliable for assessing the presence of a pulse because it is a large artery that can be palpated firmly against the cervical vertebrae. The radial artery, commonly used for taking a pulse in conscious individuals, may not be palpable in unresponsive patients due to potential variations in blood flow or positioning. The popliteal artery, located behind the knee, may be less accessible and also harder to palpate, especially in patients who are lying flat. The brachial artery, although used in infants and occasionally in adults, is more commonly employed for checking pulse in smaller individuals or when a blood pressure is being taken. Assessing the carotid pulse is a standard part of the assessment in Basic Life Support protocols, as it helps determine circulation effectively in emergency situations.

**2. Which action is an example of critical thinking in a BLS team during cardiac arrest?**

- A. Following protocol without assessment**
- B. Determining actions based on assessment findings**
- C. Only focusing on compressions**
- D. Waiting for instructions without reassessing**

Determining actions based on assessment findings demonstrates critical thinking in a BLS team during a cardiac arrest situation. This approach reflects the ability to analyze the current situation, evaluate the effectiveness of interventions, and make informed decisions that can adapt to the needs of the patient. In a dynamic and often chaotic environment like a cardiac arrest, relying purely on protocols without taking into account the specific circumstances can lead to ineffective or delayed responses. Critical thinking requires assessing the patient's condition continuously and adjusting actions accordingly, such as determining whether to provide shocks or advanced interventions based on the rhythm seen on the monitor. This adaptability ensures that the response is not only systematic but also tailored to the immediate needs of the patient, ultimately improving the chances of a successful resuscitation. In contrast, simply following protocols without assessment limits the ability to respond to the unique aspects of each cardiac arrest case, while focusing solely on compressions neglects the full range of interventions required. Waiting for instructions without reassessing can result in missed opportunities for timely care, reflecting the need for proactive involvement and situational awareness among all members of the BLS team.

**3. What is the recommended ratio of compressions to breaths for adult CPR?**

- A. 15:1
- B. 30:2**
- C. 5:1
- D. 20:2

The recommended ratio of compressions to breaths for adult CPR is 30:2. This means that for every 30 chest compressions delivered, there should be two rescue breaths. This ratio is designed to maximize the person's chance of survival by providing high-quality compressions, which are essential for maintaining blood circulation, while also ensuring that ventilation is provided to oxygenate the blood. This ratio is particularly important for adult patients because it optimizes the balance between compressions and breaths, allowing for effective blood flow while also addressing the need for oxygen delivery. By adhering to the 30:2 ratio, CPR providers can maintain the effectiveness of their resuscitation efforts, especially in a situation where time is critical and the goal is to restore the patient's circulation and oxygenation as quickly as possible. The other ratios listed are not recommended because they either provide too few compressions per breath, compromising blood circulation, or are not established guidelines for adult CPR.

**4. During what scenario is it crucial to determine whether additional help is needed?**

- A. When providing routine care
- B. During a visual assessment of a collapsed patient**
- C. When cleaning the area after an incident
- D. While conducting a patient survey

Determining whether additional help is needed is paramount during a visual assessment of a collapsed patient. In this critical situation, assessing the patient's condition helps identify the severity of the collapse and the necessary interventions. Observing changes in responsiveness, breathing, and other vital signs guides the responder to decide if emergency medical services should be activated or if additional personnel are required to ensure that appropriate care is provided. Timely intervention can significantly affect the patient's outcome, emphasizing the need for clear judgment on whether further assistance is needed based on the patient's state. In contrast, engaging in routine care, cleaning the area after an incident, or conducting a patient survey does not typically involve immediate life-threatening conditions, making it less essential to assess for additional assistance in those scenarios.

**5. Which step should Vickie take first when using an AED?**

- A. Turn on the AED**
- B. Attach the AED pads**
- C. Start CPR immediately**
- D. Call for emergency assistance**

When using an Automated External Defibrillator (AED), the first step Vickie should take is to turn on the AED. This action is critical because the device will initiate its internal checks and provide voice prompts or visual instructions to guide the user through the defibrillation process. Activating the AED before any other actions allows it to assess the patient's heart rhythm and determine if a shock is needed. Those prompts will instruct on the next steps, including pad placement and when to continue CPR. While other actions such as attaching the pads, performing CPR, and calling for emergency assistance are also important in a cardiac emergency, turning on the AED sets the necessary foundation for effectively using the device and responding to the patient's condition. Prioritizing this step ensures that the AED is ready to assist as quickly as possible, enhancing the chances of survival for the patient experiencing cardiac arrest.

**6. If a child with an obstructed airway becomes unresponsive, what should you do first?**

- A. Immediately start providing rescue breaths**
- B. Call for emergency medical assistance**
- C. Gently lower the child to the ground and begin CPR**
- D. Attempt back blows and abdominal thrusts**

In the event that a child with an obstructed airway becomes unresponsive, the priority is to ensure that the child receives immediate care to restore their breathing and circulation. Gently lowering the child to the ground and beginning CPR is the correct first action in this scenario. Specifically, when a child is unresponsive, the likelihood of cardiac arrest increases, especially if the airway has been obstructed long enough to cause a lack of oxygen. Starting CPR immediately can help maintain blood flow to vital organs and can be critical in preventing further complications. It's important to note that while rescue breaths are essential for a child in cardiac arrest, they should only be administered after ensuring circulation is established through chest compressions. Calling for emergency medical assistance is vital, but initiating CPR takes precedence because it directly addresses the immediate threat to the child's life. Attempting back blows and abdominal thrusts is appropriate when the child is conscious and responsive, as these methods help clear an obstruction in the airway; however, when the child is unresponsive, initiating CPR is the most crucial step.

**7. In respiratory arrest care for an adult, what is the recommended frequency of ventilations?**

- A. 1 ventilation every minute**
- B. 1 ventilation every 2 seconds**
- C. 1 ventilation every 6 seconds**
- D. 1 ventilation every 10 seconds**

The recommended frequency of ventilations in respiratory arrest care for an adult is one ventilation every 6 seconds. This rate provides enough time for adequate inflation of the lungs and ensures that oxygen is delivered effectively without causing hyperventilation. Ventilating too quickly can lead to complications such as air swallowing, increased intrathoracic pressure, and decreased blood return to the heart, which can undermine the efficiency of effective ventilation. In this context, every 6 seconds allows the caregiver to provide a breath while also maintaining a rhythm that is manageable and allows for monitoring of the patient's condition. This timing is based on guidelines that prioritize both the adequacy of the breaths delivered and the patient's overall ventilation needs. It balances the urgency of needing to provide oxygen while also ensuring that the airway is protected and the physiologic needs of the person in respiratory arrest are met.

**8. During the rapid assessment, what should you scan for?**

- A. Signs of emotional distress**
- B. Specific allergies**
- C. Blood and other signs or symptoms**
- D. Previous medical history**

During the rapid assessment, scanning for blood and other signs or symptoms is crucial because it allows for the quick identification of life-threatening conditions that may not be immediately visible. This assessment focuses on detecting visible injuries, such as bleeding, which can indicate severe trauma or require immediate intervention. Additionally, other symptoms, such as signs of shock or respiratory distress, can be recognized during this brief evaluation, guiding responders in prioritizing care to address the most critical issues first. While signs of emotional distress, specific allergies, and previous medical history can all be significant in a comprehensive assessment, they are typically addressed in a more thorough evaluation after immediate threats to life have been assessed and managed. The primary goal during the rapid assessment phase is to ensure the patient is stable and to identify any urgent medical needs that require prompt action.

**9. What is the maximum amount of time you should spend checking for breathing and a pulse?**

- A. No more than 10 seconds**
- B. No more than 30 seconds**
- C. No more than 5 seconds**
- D. No more than 15 seconds**

In Basic Life Support (BLS), it is critical to act quickly and efficiently when responding to a potential cardiac arrest. The guideline indicates that the maximum amount of time to check for breathing and a pulse is no more than 10 seconds. This time constraint is crucial because prolonged checks can delay the initiation of lifesaving measures such as chest compressions and rescue breaths. If you find that the person is not breathing or has no pulse, immediate intervention in the form of CPR (cardiopulmonary resuscitation) should follow without hesitation. By limiting the time you check for breathing and a pulse to 10 seconds, you ensure that you maintain the necessary urgency in providing care, which can significantly improve the chances of survival for the individual experiencing cardiac arrest.

**10. What should you do if the Team Leader asks you to perform a skill you are not comfortable with during resuscitation?**

- A. Attempt it anyway**
- B. Ask for a demonstration**
- C. Inform the Team Leader of your limits**
- D. Wait and see if someone else volunteers**

When faced with a situation during resuscitation where you are asked to perform a skill you are not comfortable with, it is essential to communicate your limitations to the Team Leader. This approach is crucial for several reasons. Firstly, effective resuscitation relies heavily on teamwork and the clear identification of each team member's roles based on their competence and comfort level. By informing the Team Leader about your limitations, you contribute to maintaining a safe environment where tasks can be assigned to those who are both qualified and confident in performing them. This fosters better decision-making in high-stress situations, ensuring that patient care remains the top priority. Additionally, acknowledging your limits can help prevent potential errors that could arise from attempting tasks for which you feel unprepared. Resuscitation scenarios are often time-sensitive, and if you were to attempt a skill inadequately, it could compromise the quality of care provided. Ultimately, open communication is key to a successful resuscitation effort. It allows the Team Leader to reassess the situation and redistribute tasks as necessary, ensuring that all actions taken are effective and appropriate for the patient's needs.



## 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](mailto: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!**

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