

Basic Life Support Instructor Practice Test (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 the compression-to-breath ratio for CPR performed by a single rescuer on an infant?**
 - A. 15:1**
 - B. 30:2**
 - C. 15:2**
 - D. 10:1**

- 2. How should you respond if you encounter a responsive choking adult?**
 - A. Encourage them to cough while staying calm**
 - B. Panic and shout for help**
 - C. Perform abdominal thrusts immediately**
 - D. Leave the person to handle it alone**

- 3. What action should be taken if a patient with suspected opioid overdose has no pulse?**
 - A. Start CPR immediately**
 - B. Provide breaths only**
 - C. Administer naloxone and monitor**
 - D. Give them water**

- 4. Which technique should NOT be used on an infant who is choking?**
 - A. Back slaps**
 - B. Chest thrusts**
 - C. Abdominal thrusts**
 - D. Nasal suction**

- 5. What technique is used to check responsiveness in a victim?**
 - A. Shaking the victim vigorously**
 - B. Asking them to answer questions**
 - C. Lightly shaking the shoulder and shouting**
 - D. Ignoring them and waiting for help**

- 6. In CPR, what is the recommended depth for chest compressions in adults?**
- A. 1 to 2 inches**
 - B. 2 to 3 inches**
 - C. At least 2 inches**
 - D. 3 to 4 inches**
- 7. What characterizes pulseless ventricular tachycardia (pVT)?**
- A. The heart beats too slowly**
 - B. The ventricles contract at an extremely rapid rate**
 - C. The heart exhibits a chaotic electrical activity**
 - D. The patient appears responsive**
- 8. What should you avoid during breath delivery in CPR?**
- A. Insufficient air supply**
 - B. Excessive ventilation**
 - C. Delayed breaths**
 - D. Inconsistent timing**
- 9. What type of consent is required to perform CPR on an adult?**
- A. Implied consent in emergencies if the person is unresponsive**
 - B. Expressed consent from the victim**
 - C. Written consent from a family member**
 - D. None, consent is not needed**
- 10. How often should you re-evaluate the victim during CPR?**
- A. Every minute**
 - B. Every 2 minutes or after each set of 30 compressions**
 - C. Every 3 minutes**
 - D. Every 5 minutes**

Answers

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

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Explanations

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1. What is the compression-to-breath ratio for CPR performed by a single rescuer on an infant?

- A. 15:1**
- B. 30:2**
- C. 15:2**
- D. 10:1**

The compression-to-breath ratio for CPR performed by a single rescuer on an infant is 15:2. This means that for every 15 chest compressions, the rescuer should provide 2 breaths. This specific ratio reflects the importance of both maintaining effective blood circulation and providing adequate oxygenation to an infant during a cardiac arrest scenario. The rationale behind using a higher number of compressions to breaths is derived from the physiological needs of infants, who can suffer from complications characterized by inadequate blood flow and oxygen supply. Ensuring a proper balance minimizes the risks associated with prolonged interrupted circulation and inadequate ventilation. In the context of CPR for infants, the 15:2 ratio is crucial for maximizing outcomes and aligning with the latest guidelines, which emphasize the importance of rapid intervention. This balance helps maintain circulation while also ensuring that the respiration process is adequately addressed, making it essential for effective lifesaving measures.

2. How should you respond if you encounter a responsive choking adult?

- A. Encourage them to cough while staying calm**
- B. Panic and shout for help**
- C. Perform abdominal thrusts immediately**
- D. Leave the person to handle it alone**

Encouraging a responsive choking adult to cough while staying calm is the correct response because coughing is the body's natural mechanism to clear the airway. When a person is able to cough, it indicates they still have some air exchange and the ability to remove the obstruction themselves. By remaining calm and reassuring, you help them focus on the act of coughing, which may dislodge the object causing the choking. This approach reduces panic, allowing the individual to apply their strength in a productive way. It's crucial to avoid interventions like performing abdominal thrusts at this stage since they may not be necessary and could potentially cause harm if the airway is not fully blocked. Furthermore, leaving the person to handle it alone would not provide the support they might need, and panicking or shouting for help could create additional stress and hinder their ability to cough effectively. Overall, encouraging coughing is the safest and most effective first response in managing a responsive choking adult.

3. What action should be taken if a patient with suspected opioid overdose has no pulse?

- A. Start CPR immediately**
- B. Provide breaths only**
- C. Administer naloxone and monitor**
- D. Give them water**

Starting CPR immediately is the appropriate action when a patient with a suspected opioid overdose has no pulse. The primary goal in such a situation is to ensure that blood continues to circulate to vital organs. CPR helps maintain oxygenation and circulation until emergency medical services arrive or until further medical interventions can be applied. In the case of an opioid overdose, although administering naloxone (an opioid antagonist) is crucial and can reverse the effects of the overdose, it is not a substitute for CPR when there is no pulse. The immediate need for effective chest compressions takes precedence, as this can be lifesaving, particularly when the patient is in cardiac arrest. Other actions, such as providing breaths only or administering water, do not address the lack of circulation that is critical in this scenario. They do not provide the necessary chest compressions to maintain blood flow, which is vital for survival. Administering naloxone should follow or accompany the initiation of CPR, but it doesn't replace the need for immediate resuscitation efforts.

4. Which technique should NOT be used on an infant who is choking?

- A. Back slaps**
- B. Chest thrusts**
- C. Abdominal thrusts**
- D. Nasal suction**

The technique that should not be used on an infant who is choking is abdominal thrusts. In infants, the anatomy and physiology are different from older children and adults, and abdominal thrusts can cause injury, such as damage to internal organs, due to the smaller size and more fragile structure of an infant's body. Instead, back slaps and chest thrusts are appropriate techniques to help an infant who is choking. Back slaps help to create pressure in the airway to expel the obstruction, while chest thrusts are an alternative that can also aid in dislodging an object. Nasal suction is typically not indicated for choking situations as it is intended for clearing nasal passages, not for removing obstructions from the airway. Understanding the specific techniques that are safe and effective for different age groups is critical in effectively managing choking emergencies.

5. What technique is used to check responsiveness in a victim?

- A. Shaking the victim vigorously**
- B. Asking them to answer questions**
- C. Lightly shaking the shoulder and shouting**
- D. Ignoring them and waiting for help**

The technique used to check responsiveness in a victim is to lightly shake the shoulder and shout. This method is effective because it is a quick and immediate way to assess whether a person is conscious and able to respond. The physical action of shaking the shoulder can elicit a reaction if the person is responsive, while the verbal stimulus of shouting their name can help determine their level of awareness. In emergency response situations, it's crucial to assess responsiveness quickly to decide the next steps, such as calling for help or initiating CPR. This approach balances the need to wake the person without causing excessive harm or discomfort, which might occur with vigorous shaking. Observing for responses such as eye opening, movement, or verbal sounds indicates that the victim is at least partially aware of their surroundings. Other methods, such as asking them to answer questions, may not be appropriate immediately, especially if the individual is unconscious or semi-conscious. Ignoring the person and waiting for help will not provide any immediate insight into their condition and can lead to delays in critical care. Therefore, the technique of gently shaking and shouting is the most appropriate and widely taught method in Basic Life Support training for assessing responsiveness.

6. In CPR, what is the recommended depth for chest compressions in adults?

- A. 1 to 2 inches**
- B. 2 to 3 inches**
- C. At least 2 inches**
- D. 3 to 4 inches**

The recommended depth for chest compressions in adults during CPR is at least 2 inches. This depth is crucial because effective compressions help to create enough pressure to circulate blood through the heart and to vital organs. The guideline emphasizes that compressions should be deep enough to ensure adequate blood flow while also allowing the chest to fully recoil between compressions. This depth aligns with current CPR guidelines endorsed by major health organizations, which focus on maximizing the chances of survival for adults in cardiac arrest. Compressions that are too shallow may not generate sufficient blood flow, significantly reducing the effectiveness of the CPR being performed. The recommendation to compress to at least 2 inches ensures that responders are applying enough force to potentially restore a pulse and improve outcomes in emergency situations.

7. What characterizes pulseless ventricular tachycardia (pVT)?

- A. The heart beats too slowly**
- B. The ventricles contract at an extremely rapid rate**
- C. The heart exhibits a chaotic electrical activity**
- D. The patient appears responsive**

Pulseless ventricular tachycardia (pVT) is characterized by the ventricles contracting at an extremely rapid rate. In this condition, the heart's electrical signals cause the ventricles to beat quickly and ineffectively, typically at rates greater than 100 beats per minute. This rapid contraction does not allow for adequate filling of the ventricles or effective pumping of blood, leading to a lack of pulse and, ultimately, insufficient blood flow to the body's organs. The high rate of ventricular contractions in pVT can lead to severe hemodynamic instability and is a life-threatening condition that requires immediate intervention. The recognition of this rhythm is crucial for the initiation of appropriate treatment, such as cardiopulmonary resuscitation (CPR) and possible defibrillation, to restore a normal heart rhythm and improve chances of survival. While other choices reference different conditions, they do not accurately describe the specific characteristics of pVT. The heart does not beat too slowly in this case, nor does it exhibit chaotic electrical activity, which is more characteristic of conditions like ventricular fibrillation. Additionally, a patient in pVT is typically unresponsive due to the lack of effective circulation, making it impossible for them to appear responsive.

8. What should you avoid during breath delivery in CPR?

- A. Insufficient air supply**
- B. Excessive ventilation**
- C. Delayed breaths**
- D. Inconsistent timing**

During breath delivery in CPR, it is essential to avoid excessive ventilation. This practice can lead to complications, such as increased intrathoracic pressure, which may hinder blood flow to the heart and reduce overall circulation. Over-inflating the lungs can also cause air to enter the stomach, increasing the risk of aspiration, which can lead to further complications during resuscitation. Maintaining an adequate balance in ventilation is crucial; breaths should be delivered just enough to make the chest rise visibly. This ensures that air is entering the lungs effectively without causing harm. Proper technique allows for the optimal exchange of oxygen and carbon dioxide, which is vital in a cardiac arrest scenario where the victim's oxygen levels are already compromised. Therefore, it's crucial to focus on delivering breaths that are not too forceful or too rapid, ensuring effective CPR while avoiding potential negative outcomes associated with excessive ventilation.

9. What type of consent is required to perform CPR on an adult?

- A. Implied consent in emergencies if the person is unresponsive**
- B. Expressed consent from the victim**
- C. Written consent from a family member**
- D. None, consent is not needed**

In emergency situations where an adult is unresponsive, implied consent is the principle that applies when performing CPR. This is based on the assumption that any reasonable person would want life-saving measures to be taken if they were unable to communicate their wishes due to a medical emergency. Implied consent allows first responders and bystanders to provide necessary care without explicitly asking for permission, as doing so could delay critical treatment. Expressed consent from the victim would typically require the person to be conscious and able to communicate their agreement, which is not possible when the individual is unresponsive. Written consent from a family member is also impractical in an emergency setting where immediate action is essential. Lastly, stating that no consent is needed overlooks the ethical and legal standards regarding patient care; implied consent acknowledges the urgency of the situation while still respecting the individual's rights. Therefore, in the context of a life-threatening emergency where the person cannot provide consent, implied consent is the appropriate type to proceed with CPR.

10. How often should you re-evaluate the victim during CPR?

- A. Every minute**
- B. Every 2 minutes or after each set of 30 compressions**
- C. Every 3 minutes**
- D. Every 5 minutes**

Re-evaluating the victim during CPR is critical to ensuring that the quality of care being provided is effective and that any necessary adjustments can be made promptly. The guideline to re-evaluate every 2 minutes or after each set of 30 compressions is based on maintaining situational awareness about the victim's condition, allowing for timely checks on their responsiveness and any signs of circulation. This interval ensures that rescuers can effectively monitor the victim's status and determine if the situation has improved—such as regaining consciousness or breathing normally—or if there is a need to continue with CPR or escalate care. This frequent assessment helps ensure that the responder is not only providing high-quality compressions but also can respond appropriately to changes in the victim's condition.

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://basiclifesupportinstructor.examzify.com>

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

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