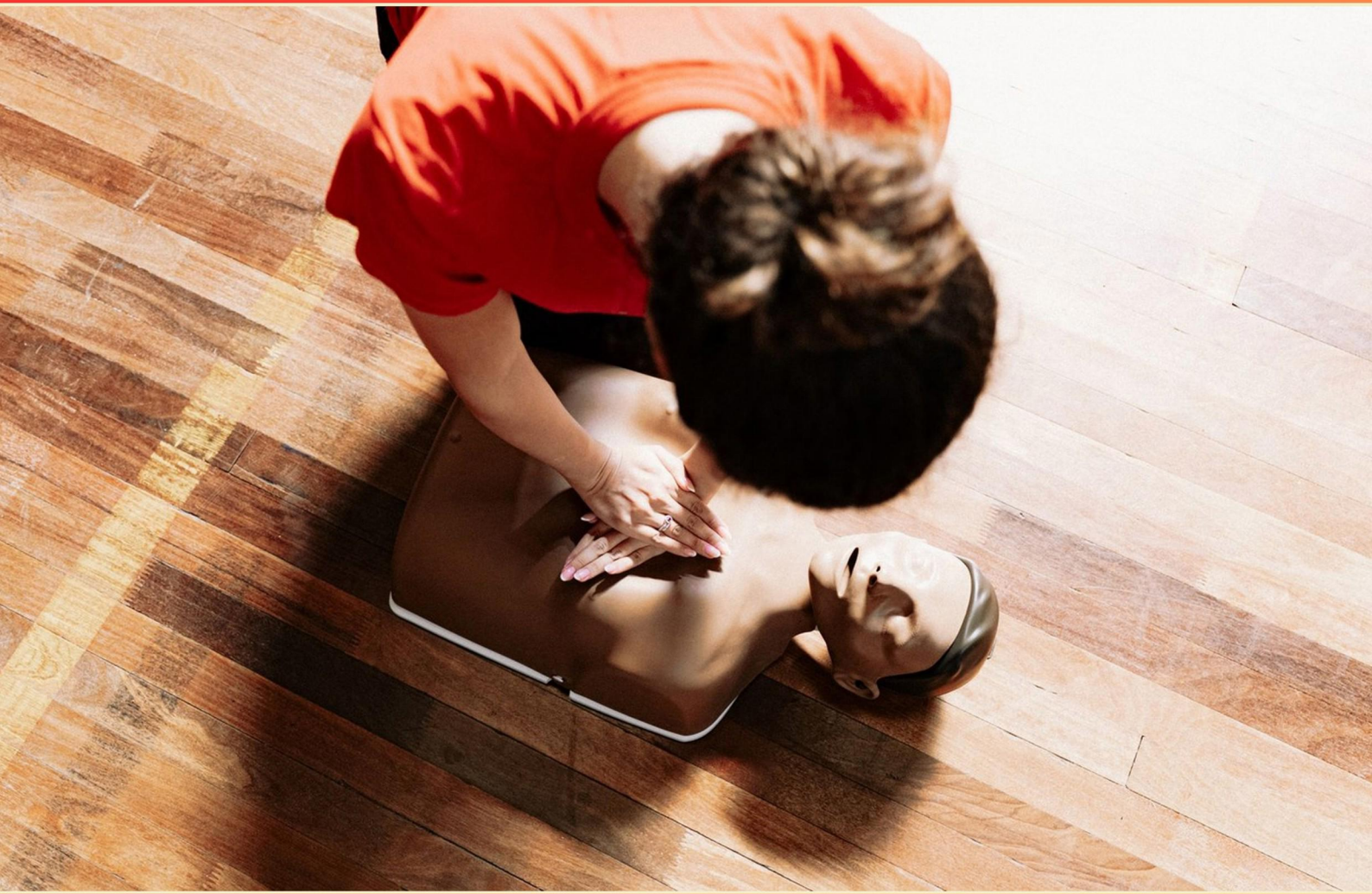


# BLS FOR HEALTH CARE PROVIDERS PRACTICE TEST (SAMPLE)

## STUDY GUIDE



## SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

**VISIT US ONLINE FOR  
THE FULL VERSION STUDY GUIDE**

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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 Theo were in respiratory arrest with a central pulse of  $\leq 60$  bpm, what action should Amy take?**
  - A. Monitor the situation
  - B. Start CPR immediately
  - C. Administer oxygen
  - D. Wait for help
- 2. What action should be taken if a child is unresponsive but has normal breathing?**
  - A. Start CPR immediately
  - B. Monitor the child closely
  - C. Provide rescue breaths only
  - D. Call for emergency services
- 3. What is a myocardial infarction commonly known as?**
  - A. Heart failure
  - B. Stroke
  - C. Heart attack
  - D. Cardiac arrest
- 4. The presence of pinpoint pupils, respiratory depression, and unconsciousness indicates what condition?**
  - A. A respiratory emergency
  - B. An opioid overdose
  - C. A cardiac arrest
  - D. A stroke
- 5. What is the compression/ventilation ratio when two providers are performing CPR without an advanced airway in place?**
  - A. 30:2
  - B. 15:2
  - C. 10:1
  - D. 2:1

- 6. Where should the hands be positioned for effective chest compressions during CPR?**
- A. On the patient's shoulders
  - B. The center of the patient's chest on the lower half of the sternum
  - C. Over the patient's abdomen
  - D. On the patient's collarbone
- 7. What should be done to minimize interruptions in chest compressions during AED analysis?**
- A. Stop compressions during analysis
  - B. Switch providers every minute
  - C. Clear the patient and resume CPR immediately
  - D. Wait for the AED to instruct you to resume
- 8. After delivering 2 ventilations, what should you continue doing?**
- A. Wait for help to arrive
  - B. Check for a pulse
  - C. Continue cycles of CPR
  - D. Perform a back blow
- 9. For which of the following children would pediatric AED pads be used?**
- A. A 10-year-old weighing 70 lbs
  - B. A 5-year-old weighing 43 lbs
  - C. A 6-year-old weighing 50 lbs
  - D. A 12-year-old weighing 105 lbs
- 10. What is the appropriate depth for chest compressions for adults?**
- A. 1 inch
  - B. 1.5 inches
  - C. At least 2 inches
  - D. At least 3 inches



## **Answers**

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

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## **Explanations**

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**1. If Theo were in respiratory arrest with a central pulse of  $\leq 60$  bpm, what action should Amy take?**

- A. Monitor the situation
- B. Start CPR immediately**
- C. Administer oxygen
- D. Wait for help

*In the situation where Theo is in respiratory arrest and has a central pulse of 60 beats per minute or less, the appropriate action is to start CPR immediately. This is because a pulse rate at or below 60 bpm in the context of respiratory arrest indicates that the victim may not be getting adequate blood flow to vital organs, leading to a high risk for cardiac arrest or other life-threatening complications. Prompt initiation of CPR is critical in such cases, as it provides essential chest compressions that help maintain circulation and preserve brain function until advanced care can be provided. The American Heart Association guidelines emphasize the importance of early CPR, especially when there is a combination of respiratory arrest and bradycardia (low heart rate) in adults. This response can help increase the chances of survival and minimize the risk of long-term damage due to lack of oxygen to vital organs. In this context, merely monitoring the situation, administering oxygen, or waiting for help would delay vital action and could lead to further deterioration of Theo's condition. Therefore, starting CPR is the most appropriate and life-saving step to take immediately.*

**2. What action should be taken if a child is unresponsive but has normal breathing?**

- A. Start CPR immediately
- B. Monitor the child closely**
- C. Provide rescue breaths only
- D. Call for emergency services

*When a child is unresponsive but has normal breathing, the most appropriate action is to monitor the child closely. This approach allows healthcare providers to ensure that the child remains stable while waiting for further assistance or assessing their condition regularly. Keeping a watchful eye is crucial for any changes in their breathing or responsiveness, which could indicate a deterioration that requires immediate intervention. In such a situation, initiating CPR would be inappropriate, as the child is breathing normally, and CPR is warranted only when there is no breathing or heartbeat. Providing rescue breaths alone would also be incorrect since it applies to a scenario where the child is not breathing. Calling for emergency services, while essential if the situation does not improve or worsens, is secondary to ensuring the child is monitored continuously until help arrives. This helps to balance the need for immediate action with the fact that the child is not in immediate respiratory distress.*

### 3. What is a myocardial infarction commonly known as?

- A. Heart failure
- B. Stroke
- C. Heart attack**
- D. Cardiac arrest

A myocardial infarction is commonly known as a heart attack. This medical condition occurs when there is a blockage in one or more of the coronary arteries, leading to a reduction or cessation of blood flow to the heart muscle. As a result, the affected part of the heart begins to suffer damage due to a lack of oxygen. It is critical to recognize the symptoms of a myocardial infarction early, as prompt medical intervention can significantly improve outcomes and reduce the extent of heart damage. Symptoms may include chest pain, shortness of breath, nausea, and cold sweats, among others. In contrast, heart failure refers to the heart's inability to pump sufficient blood to meet the body's needs and can occur as a result of various heart conditions, including myocardial infarction. A stroke occurs when the blood supply to part of the brain is interrupted or significantly reduced, resulting in tissue damage. Cardiac arrest, which is a sudden loss of heart function, can occur during a myocardial infarction if the heart's electrical system malfunctions. However, a myocardial infarction specifically denotes the event where heart tissue is dying due to insufficient blood flow, which is why it is accurately referred to as a heart attack.

### 4. The presence of pinpoint pupils, respiratory depression, and unconsciousness indicates what condition?

- A. A respiratory emergency
- B. An opioid overdose**
- C. A cardiac arrest
- D. A stroke

The symptoms of pinpoint pupils, respiratory depression, and unconsciousness are characteristic indicators of an opioid overdose. Opioids, such as morphine, heroin, and prescription pain medications, can significantly depress the central nervous system, which affects both the respiratory drive and consciousness levels. In an opioid overdose, the respiratory center in the brain becomes significantly depressed, leading to slow or shallow breathing, which may ultimately lead to respiratory failure if not treated promptly. Pinpoint pupils are a classic sign of opioid use or overdose, resulting from the drug's effects on the autonomic nervous system. Additionally, loss of consciousness can occur due to the overall suppression of brain function, which can be life-threatening. Understanding these signs is crucial in an emergency context, as prompt intervention, such as administering naloxone (an opioid antagonist), can reverse the effects of the overdose and restore normal respiration and consciousness.

**5. What is the compression/ventilation ratio when two providers are performing CPR without an advanced airway in place?**

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

*The compression/ventilation ratio when two providers are performing CPR without an advanced airway in place is 15:2. This ratio is established to provide a balance between effective compressions and adequate ventilation. During CPR, high-quality chest compressions are crucial for maintaining blood flow to vital organs, particularly the heart and brain. When two providers are present, they can alternate roles to minimize fatigue, allowing for continuous and effective compressions while also ensuring that patients receive sufficient ventilation through rescue breaths. The 15:2 ratio means that for every 15 compressions delivered, the providers will pause to give 2 breaths. This approach is favored in scenarios where two rescuers are available, as it allows for more frequent ventilations compared to a single provider, which emphasizes a greater focus on maintaining circulation through compressions as well. This method helps to optimize patient outcomes during cardiac emergencies by ensuring that participants in the rescue are working efficiently and collaboratively to restore oxygenation and circulation.*

**6. Where should the hands be positioned for effective chest compressions during CPR?**

- A. On the patient's shoulders
- B. The center of the patient's chest on the lower half of the sternum**
- C. Over the patient's abdomen
- D. On the patient's collarbone

*For effective chest compressions during CPR, the hands should be positioned in the center of the patient's chest on the lower half of the sternum. This specific location allows for the most effective compression of the heart, which is located directly behind the sternum. By placing the hands here, the compressions can create the necessary pressure to help circulate blood, thereby delivering oxygen to vital organs until normal heart function can be restored or advanced medical help arrives. Proper hand placement is crucial because it maximizes the effectiveness of each compression. If the hands are positioned too high or too low, it may not adequately compress the heart, which can lead to ineffective attempts at resuscitation. Additionally, compressing over the abdomen or collarbone can lead to injury or ineffective compressions, while positioning hands on the shoulders does nothing to aid circulation. Therefore, knowing and executing the correct hand placement during CPR is vital for any health care provider.*

**7. What should be done to minimize interruptions in chest compressions during AED analysis?**

- A. Stop compressions during analysis
- B. Switch providers every minute
- C. Clear the patient and resume CPR immediately**
- D. Wait for the AED to instruct you to resume

*To minimize interruptions in chest compressions during AED analysis, it is crucial to understand the appropriate action to take when using an AED. When the AED is analyzing the heart rhythm, it is important to ensure that no one is touching the patient, which can cause artifacts in the analysis and potentially lead to an incorrect shock recommendation. The recommended practice is to clear the area around the patient and refrain from intervening until the AED has completed its analysis. By doing so, you ensure an accurate reading of the heart's rhythm. The correct action is to wait for the AED to instruct you to resume CPR, which ensures that the analysis is not hindered by any interference. This practice helps maintain the effectiveness of the resuscitation efforts, as prolonged interruptions in chest compressions can reduce the likelihood of survival in a cardiac arrest scenario. Thus, the best strategy is to ensure the AED has a clear opportunity to assess the patient without interruptions, allowing for timely and accurate resuscitation efforts.*

**8. After delivering 2 ventilations, what should you continue doing?**

- A. Wait for help to arrive
- B. Check for a pulse
- C. Continue cycles of CPR**
- D. Perform a back blow

*After delivering two ventilations, the continuation of effective CPR cycles is critical. When performing CPR, the primary goal is to restore circulation and improve the chances of survival for a victim in cardiac arrest. This involves alternating between chest compressions and ventilations. After providing the initial two breaths, immediately transitioning back to chest compressions is essential, as they help circulate oxygenated blood to vital organs. Maintaining a rhythm of compressions and ventilations ensures that the body is receiving adequate oxygen and blood flow. Additionally, waiting for help or checking for a pulse at that moment may lead to delays in critical lifesaving actions. The emphasis on ongoing compressions after initial ventilations reflects the priority of keeping blood circulating until advanced medical support can be provided.*

**9. For which of the following children would pediatric AED pads be used?**

- A. A 10-year-old weighing 70 lbs
- B. A 5-year-old weighing 43 lbs**
- C. A 6-year-old weighing 50 lbs
- D. A 12-year-old weighing 105 lbs

*Pediatric AED pads are specifically designed for use on smaller children and infants because their hearts and bodies differ significantly from those of adults. The guidelines for when to use pediatric AED pads generally support their use in children who are under 8 years old or weigh less than 55 pounds. In this case, the 5-year-old weighing 43 lbs falls within the acceptable age and weight range for pediatric pads. Using these pads helps deliver a lower dose of energy, which is crucial for effectively treating a child's heart in a safe manner. These pads often have different electrode placements and energy settings tailored explicitly for younger patients, enhancing the likelihood of a successful shock while minimizing potential harm. The other children in the options either exceed the age or weight limits that indicate the need for pediatric pads, making their use inappropriate for those situations. Therefore, the choice of the 5-year-old is justified based on the established guidelines for pediatric resuscitation.*



**10. What is the appropriate depth for chest compressions for adults?**

- A. 1 inch
- B. 1.5 inches
- C. At least 2 inches**
- D. At least 3 inches

*The appropriate depth for chest compressions for adults during cardiopulmonary resuscitation (CPR) is at least 2 inches. This depth is crucial because compressions that are too shallow may not effectively circulate blood to the vital organs, particularly the heart and brain. According to guidelines set by organizations such as the American Heart Association, compressions should be performed at a depth of about 2 to 2.4 inches to ensure adequate perfusion. This depth allows for sufficient compression of the heart, which is essential for maintaining blood flow during a cardiac emergency. Using the right depth also ensures that the chest fully recoils between compressions, enhancing the effectiveness of each compression. The guidelines emphasize proper technique, ensuring both the depth and the rate of compressions align with best practices for improving the chances of survival after cardiac arrest.*

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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](mailto:hello@examzify.com).

Or visit your dedicated course page for more study tools and resources:

<https://blshealthcareproviders.examzify.com>

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

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