

BLS HOSPITAL CORPSMAN PRACTICE EXAM (SAMPLE)

STUDY GUIDE



Prepare with structure. Pass with confidence



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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 of the following is a critical component of effective CPR?**
 - A. Providing rescue breaths every 30 compressions
 - B. Using proper hand positioning
 - C. Maintaining eye contact with the victim
 - D. Taking breaks for breaths
- 2. Which of the following is NOT a type of ventilation method?**
 - A. Mouth-to-mouth
 - B. Bag-mask ventilation (BMV)
 - C. Chest compression ventilation
 - D. Pocket mask
- 3. What is the depth of compressions for children during CPR?**
 - A. 1 inch
 - B. 1.5 inches
 - C. 2 inches
 - D. 2.5 inches
- 4. If a person is not breathing but has a pulse, what action should you take?**
 - A. Start chest compressions
 - B. Provide rescue breaths
 - C. Call for emergency help
 - D. Monitor them closely
- 5. What indicates effective chest compressions during CPR?**
 - A. Minimal movement of the chest
 - B. The chest visibly rises and falls with each compression
 - C. Heart rate increases
 - D. Breathing resumes
- 6. What is the first step in responding to a potential cardiac arrest?**
 - A. Check for breathing
 - B. Call emergency services
 - C. Assess the scene for safety
 - D. Begin chest compressions

- 7. During what scenario should the Heimlich maneuver not be used?**
- A. On a conscious victim
 - B. On an unconscious victim
 - C. On a child under the age of three
 - D. On a victim who is coughing
- 8. When is it appropriate to stop CPR?**
- A. When emergency personnel arrive and take over
 - B. Only if you are too tired to continue
 - C. When the victim begins to breathe normally
 - D. When someone tells you to stop
- 9. If you are alone with a child who requires CPR, how long should you perform CPR before calling for help?**
- A. 5 minutes
 - B. 1 minute
 - C. About 2 minutes or 5 cycles
 - D. As long as you can sustain
- 10. For children, how should you begin CPR if they are found unresponsive with no pulse?**
- A. Only provide rescue breaths until emergency help arrives
 - B. Begin with chest compressions immediately
 - C. Check for breathing for 10 seconds
 - D. Place them on their side to clear airways

Answers

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

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Explanations

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1. Which of the following is a critical component of effective CPR?

- A. Providing rescue breaths every 30 compressions
- B. Using proper hand positioning**
- C. Maintaining eye contact with the victim
- D. Taking breaks for breaths

Using proper hand positioning is crucial for effective CPR because it directly impacts the quality and efficiency of chest compressions. Proper hand placement ensures that compressions are delivered at the correct location on the chest, which is typically in the lower half of the sternum. This positioning allows for optimal depth and allows for effective blood flow to vital organs during the compression phase of CPR. In addition to promoting effective compressions, correct hand positioning reduces the risk of injury to the ribcage and internal organs, while ensuring that compressions are delivered at the correct angle and force. The recommended depth for adult compressions is at least 2 inches (5 cm), and the compressions should be at a rate of 100 to 120 compressions per minute. Achieving this depth and rate is more likely when the hands are positioned correctly. Other choices may incorporate elements of CPR but do not emphasize the fundamental mechanics of compressions as strongly. For instance, providing rescue breaths has its place in specific CPR scenarios, but the focus in high-quality CPR is largely on maintaining effective compressions. Maintaining eye contact does not aid in providing the life-saving measures required during cardiac arrest. Lastly, taking breaks for breaths can disrupt the compression cycle, which needs to remain consistent and

2. Which of the following is NOT a type of ventilation method?

- A. Mouth-to-mouth
- B. Bag-mask ventilation (BMV)
- C. Chest compression ventilation**
- D. Pocket mask

The correct answer identifies chest compression ventilation as NOT a recognized method of ventilation. In this context, ventilation refers to methods that are specifically aimed at providing air to a patient's lungs to assist or replace natural breathing. The other options listed are all established techniques for providing rescue breaths in emergency situations. Mouth-to-mouth involves creating a seal around the mouth to deliver breaths directly into the patient's lungs. Bag-mask ventilation utilizes a bag and a mask to provide a higher concentration of oxygen to the patient, often used when professionals are present. A pocket mask is a smaller, portable device designed to fit over the patient's mouth and nose, allowing for effective ventilation while protecting the rescuer. In contrast, chest compression ventilation indicates a blending of compressions and ventilation, which does not exist as a formal method of providing ventilation on its own. Chest compressions are utilized to maintain circulation, particularly during cardiopulmonary resuscitation (CPR), but they do not encompass a method for delivering air to the lungs. Therefore, it clearly stands apart from the established ventilation techniques mentioned.

3. What is the depth of compressions for children during CPR?

- A. 1 inch
- B. 1.5 inches
- C. 2 inches**
- D. 2.5 inches

The depth of compressions for children during CPR is indeed 2 inches. This depth is crucial for providing effective blood circulation during cardiac arrest. The rationale behind targeting this specific depth is based on the physiological differences in a child's body compared to adults. Compressions of this depth ensure that sufficient pressure is applied to the chest, which is necessary to compress the heart and facilitate blood flow to vital organs. In practice, achieving a depth of 2 inches allows the rescuer to utilize their body weight effectively, thereby maximizing the force applied during each compression. It's also important to note that compressions should be delivered at a rate of 100 to 120 compressions per minute, which further emphasizes the balance between depth and speed for optimal resuscitation outcomes. The guideline of 2 inches is part of a broader set of recommendations that aim to standardize practices in CPR across different age groups, ensuring that rescues are effective and based on current evidence in emergency medical care.

4. If a person is not breathing but has a pulse, what action should you take?

- A. Start chest compressions
- B. Provide rescue breaths**
- C. Call for emergency help
- D. Monitor them closely

When a person is not breathing but still has a pulse, the appropriate action to take is to provide rescue breaths. The rationale behind this is that while the heart is still beating, the body is not getting the oxygen it needs due to the absence of effective breathing. Therefore, delivering rescue breaths helps to ventilate the person's lungs and ensures that oxygen is circulated through their bloodstream. Providing rescue breaths involves giving the person a breath every 5 to 6 seconds, which helps to maintain oxygen levels until normal breathing resumes or emergency medical services arrive. This method allows for the vital exchange of gases—oxygen in and carbon dioxide out. Other potential actions, such as starting chest compressions, would not be suitable in this situation because chest compressions are reserved for situations where there is no pulse. Calling for emergency help is advisable in any life-threatening scenario but does not address the immediate need for oxygenation. Monitoring the person closely is necessary, but it is not a definitive intervention that addresses the critical issue of the absence of breathing. Thus, providing rescue breaths is the most effective and lifesaving action in this scenario.

5. What indicates effective chest compressions during CPR?

- A. Minimal movement of the chest
- B. The chest visibly rises and falls with each compression**
- C. Heart rate increases
- D. Breathing resumes

Effective chest compressions during CPR are indicated by the chest visibly rising and falling with each compression. This visual cue is essential because it demonstrates that compressions are providing adequate circulation and blood flow to the vital organs, primarily the brain and heart. When the chest rises, it signifies that air is being forced into the lungs, which is crucial during the whole resuscitation effort, particularly in conjunction with rescue breaths if provided. Each compression should reduce the chest to its normal position, ensuring that adequate negative pressure is created to draw blood back into the heart after each compression. If the chest does not visibly rise, it may suggest that the compressions are ineffective, either because the compressions are too shallow or not being performed correctly. Other indicators of effective compressions may include changes in heart rhythm or return of spontaneous circulation, but these typically occur after compressions and when the individual starts recovering. Therefore, the visible rise and fall of the chest during compressions is the clearest and immediate indication of effective CPR being performed.

6. What is the first step in responding to a potential cardiac arrest?

- A. Check for breathing
- B. Call emergency services
- C. Assess the scene for safety**
- D. Begin chest compressions

Assessing the scene for safety is crucial as the first step in responding to a potential cardiac arrest. Ensuring that the environment is safe protects both the rescuer and the victim from further injury or harm. This includes looking for any potential hazards, such as traffic, fire, or electrical issues, that could pose a danger during the rescue efforts. Once the scene is deemed safe, the rescuer can then proceed with the next steps in the emergency response process, such as checking for responsiveness and breathing, calling emergency services, or starting CPR if necessary. Prioritizing safety is vital in providing effective aid and ensuring that help can be delivered without compromising the rescuer's well-being.

7. During what scenario should the Heimlich maneuver not be used?

- A. On a conscious victim
- B. On an unconscious victim**
- C. On a child under the age of three
- D. On a victim who is coughing

The Heimlich maneuver is an emergency technique used to help someone who is choking. However, it is contraindicated when the victim is unconscious. In such scenarios, the chances of moving air through the airway become complex due to the lack of controlled breathing and muscular response. When a person is unconscious, they are unable to cough or breathe effectively, which generally means airflow is obstructed. Instead of performing the Heimlich maneuver, which could lead to further complications like aspiration, it's crucial to activate emergency services immediately and begin CPR if needed. This focus on proper airway management and resuscitation techniques ensures that any obstructive risks are handled with care. Coughing, particularly forceful coughing, indicates that the airway is only partially obstructed, and the individual should be encouraged to continue coughing as it may help expel the object on their own. In the case of a child under the age of three, modifications to the Heimlich maneuver or other appropriate strategies should be employed rather than standard approaches meant for adults.

8. When is it appropriate to stop CPR?

A. When emergency personnel arrive and take over

B. Only if you are too tired to continue

C. When the victim begins to breathe normally

D. When someone tells you to stop

Stopping CPR is appropriate when emergency personnel arrive and take over the resuscitation efforts. This change in responsibility ensures that the victim receives the most qualified and advanced level of care. Emergency responders are equipped with training, tools, and medications that can significantly increase the chances of survival. It is essential for lay responders to continue CPR until trained professionals arrive to prevent any interruption in life-saving efforts. Continuing CPR until professional help arrives is crucial, as stopping for any other reason could jeopardize the victim's chances of survival. While an individual feeling too exhausted may seek relief, the priority is to keep the flow of CPR continuous. Similarly, resuming normal breathing by the victim indicates a positive response, but care should be maintained until professionals take charge. Additionally, stopping CPR simply because someone asks does not guarantee that it is safe to do so unless that person is a trained medical professional confirming the situation has changed.

9. If you are alone with a child who requires CPR, how long should you perform CPR before calling for help?

A. 5 minutes

B. 1 minute

C. About 2 minutes or 5 cycles

D. As long as you can sustain

When performing CPR on a child and you are alone, the recommended guideline is to provide approximately 2 minutes of CPR or about 5 cycles of chest compressions and rescue breaths before calling for help. This approach is based on the understanding that during those first crucial minutes, high-quality CPR significantly increases the chances of survival. By performing CPR for this time frame, you are maximizing the child's chances of survival by ensuring that blood circulation and oxygenation are maintained while also minimizing the time taken before calling for assistance. After this initial CPR effort, calling for emergency help allows additional support to be brought in without compromising the immediate lifesaving measures you are providing. Calling for help too early might not allow enough time for effective CPR to be administered, which is vital in improving the outcomes in cases of cardiac arrest in children. Therefore, focusing on CPR for about 2 minutes before seeking help establishes a solid foundation of care.

10. For children, how should you begin CPR if they are found unresponsive with no pulse?

- A. Only provide rescue breaths until emergency help arrives
- B. Begin with chest compressions immediately**
- C. Check for breathing for 10 seconds
- D. Place them on their side to clear airways

When a child is found unresponsive without a pulse, initiating CPR with chest compressions is crucial because it helps maintain circulation to vital organs, particularly the brain and heart. Since children might experience cardiac arrest due to respiratory issues, starting with chest compressions ensures that blood continues to flow while you assess the situation further. Starting CPR with chest compressions also aligns with the recommendations of the American Heart Association, which emphasizes that effective chest compressions are vital in the early phase of cardiac arrest. This approach helps maximize the chances of a favorable outcome by maintaining blood flow until emergency medical services can take over. Other methods, such as solely providing rescue breaths or checking for breathing, could delay critical life-saving actions. Placing the child on their side might be useful in certain cases, such as when they are breathing or if there is a risk of choking, but it is not the appropriate first step in cardiac arrest situations where immediate chest compressions are necessary.

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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.

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

<https://blshospitalcorpsman.examzify.com>

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

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