

CANADIAN RED CROSS BASIC LIFE SUPPORT (BLS) PRACTICE TEST (SAMPLE) STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

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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. How many compressions are performed in the two-responder cycle for an infant?**
 - A. 30 compressions, 2 ventilations
 - B. 15 compressions, 2 ventilations
 - C. 3 compressions, 1 ventilation
 - D. 10 compressions, 2 ventilations
- 2. What method should be used to check for responsiveness in an infant?**
 - A. Gently tap the shoulder and shout
 - B. Gently tap the foot and shout
 - C. Shake the infant vigorously
 - D. Call the infant's name loudly
- 3. How should you position an adult who is choking but becomes unresponsive?**
 - A. Place them in a sitting position
 - B. Carefully lower them to the ground and begin CPR
 - C. Perform abdominal thrusts immediately
 - D. Leave them in an upright position to breathe
- 4. What is considered a normal SpO2 level?**
 - A. 85-90
 - B. 90-95
 - C. 95-100
 - D. 100-105
- 5. Where do you check for a pulse on an unresponsive child or adult?**
 - A. Brachial arteries in the inner arm
 - B. Radial arteries at the wrist
 - C. Carotid arteries in the neck
 - D. Popliteal arteries behind the knees

6. What is the initial action for Infant CPR?

- A. Begin CPR immediately
- B. Call for help and begin CPR if unresponsive
- C. Assess the situation for a few minutes
- D. Perform the Heimlich maneuver

7. How should you react if you suspect a spinal injury in a conscious patient?

- A. Minimize movement and keep the patient still until help arrives
- B. Encourage the patient to move to assess their condition
- C. Comfort the patient by moving them to a safer location
- D. Conduct a full assessment before calling for help

8. How many chest compressions should you give per minute to an infant?

- A. 60 compressions
- B. 80 compressions
- C. 100 compressions
- D. 120 compressions

9. What is the significance of the BLS assessment triangle?

- A. It helps in quick visual assessment of the patient's airway, breathing, and circulation
- B. It provides a backup plan for CPR
- C. It assists in identifying the presence of a pulse
- D. It is used solely for children

10. How should rescue breaths be given in BLS?

- A. By using a mechanical ventilator only
- B. Sealing the lips around the person's mouth and providing breaths every 5 to 6 seconds while checking for chest rise
- C. Giving multiple rapid breaths in succession
- D. Using an ambu bag exclusively

Answers

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

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Explanations

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1. How many compressions are performed in the two-responder cycle for an infant?

- A. 30 compressions, 2 ventilations
- B. 15 compressions, 2 ventilations**
- C. 3 compressions, 1 ventilation
- D. 10 compressions, 2 ventilations

In a two-responder cycle for an infant, the correct protocol consists of performing 15 compressions followed by 2 ventilations. This ratio reflects the specific adjustments made for infants, as they require different care compared to adults and older children during resuscitation. The frequency of compressions at 15 per cycle ensures that the infant receives adequate blood circulation during cardiac arrest, while the 2 ventilations help provide oxygen effectively. The rationale for the 15:2 ratio is based on pediatric resuscitation guidelines, which emphasize the importance of maintaining effective blood flow while also ensuring sufficient oxygen delivery. When working in teams, this cycle allows for continuous care and helps prevent fatigue among responders, optimizing the chances of a positive outcome for the infant. This understanding of proper compression and ventilation ratios is crucial for effective CPR and aligns with the latest evidence-based practices.

2. What method should be used to check for responsiveness in an infant?

- A. Gently tap the shoulder and shout
- B. Gently tap the foot and shout**
- C. Shake the infant vigorously
- D. Call the infant's name loudly

To check for responsiveness in an infant, the appropriate method is to gently tap the foot and shout. This approach is particularly effective for infants because they are smaller and more vulnerable than older children or adults. Tapping the foot allows for a gentle interaction without causing distress or injury, which is crucial in a situation involving an infant. Using this method provides not just a way to assess responsiveness but also avoids potential harm. Infants may startle or react negatively to being shaken or having strong, loud stimuli directed at them, which could increase their risk of injury or distress. Therefore, a gentle approach is key, as it helps the rescuer gauge the infant's awareness and responsiveness without overwhelming them. The other methods listed could result in inappropriate levels of stimulation or physical harm to the infant, making gentle foot tapping the safest and most effective method for checking responsiveness in this age group.

3. How should you position an adult who is choking but becomes unresponsive?

- A. Place them in a sitting position
- B. Carefully lower them to the ground and begin CPR**
- C. Perform abdominal thrusts immediately
- D. Leave them in an upright position to breathe

When an adult who is choking becomes unresponsive, the appropriate action is to carefully lower them to the ground and begin CPR. This is crucial because an unresponsive individual cannot perform any voluntary actions, including coughing or breathing effectively. By lowering them to the ground, you ensure that they are in a safe and flat position, allowing for effective CPR. Initiating CPR includes chest compressions that can help to dislodge an obstruction in the airway while also providing artificial circulation. During CPR, it is also important to check the airway for any visible obstructions after each set of compressions. If an obstruction is noted, techniques such as a finger sweep may be employed, but only if it is safe to do so. Positions like sitting or remaining upright are not appropriate in this scenario because they do not allow for effective airway management or circulation. Performing abdominal thrusts on an unresponsive person is also dangerous as it might cause further complications, such as injury or additional choking. Thus, beginning CPR in a careful manner is imperative for the best chance of survival in a choking emergency.

4. What is considered a normal SpO2 level?

- A. 85-90
- B. 90-95
- C. 95-100**
- D. 100-105

A normal SpO2 (peripheral capillary oxygen saturation) level is considered to be in the range of 95-100%. This percentage reflects the amount of oxygen being carried in the blood relative to the total capacity of hemoglobin to bind oxygen. Levels within this range indicate that the respiratory and circulatory systems are functioning effectively, allowing for adequate oxygen delivery to the body's tissues. Values below 95% can signify hypoxemia, which might suggest a deficiency of oxygen in the blood, and levels above 100% are physiologically impossible and indicate a measurement error or an issue with the monitoring device. Therefore, maintaining the SpO2 in the range of 95-100% is critical for ensuring good health and preventing complications associated with insufficient oxygenation.

5. Where do you check for a pulse on an unresponsive child or adult?

- A. Brachial arteries in the inner arm
- B. Radial arteries at the wrist
- C. Carotid arteries in the neck**
- D. Popliteal arteries behind the knees

Checking for a pulse is a critical step in assessing an unresponsive individual, as it helps determine the presence of circulation. In both children and adults, the carotid arteries are the most reliable site for pulse assessment in emergency situations. The carotid arteries are located in the neck, which allows for easier access and a stronger pulse signal compared to other locations. This area is particularly advantageous because it is typically less obstructed and can be palpated more easily, ensuring that rescuers can efficiently evaluate a person's cardiac status. Other locations, such as the brachial arteries in the inner arm or the radial arteries at the wrist, may not provide as clear or strong a pulse in an unresponsive individual, particularly if there is any minimal circulation. Additionally, checking the popliteal arteries behind the knees is not practical in such scenarios, as the position of the individual may hinder access, and blood flow may be less detectable. Thus, using the carotid arteries is the recommended and most effective practice in emergency situations for pulse assessment.

6. What is the initial action for Infant CPR?

- A. Begin CPR immediately
- B. Call for help and begin CPR if unresponsive**
- C. Assess the situation for a few minutes
- D. Perform the Heimlich maneuver

The initial action for Infant CPR is to call for help and begin CPR if the infant is unresponsive. In an emergency involving infants, it is crucial to ensure that help is on the way while also initiating lifesaving measures. When an infant is suspected to be unresponsive, the first step is to gently tap the infant and shout to see if there is any response. If there is no response, calling for emergency assistance is necessary to ensure that advanced medical help is on its way. Starting CPR immediately without first calling for help can delay potentially life-saving measures. In cases of unresponsiveness, performing CPR can be crucial, but it's equally important to ensure that someone has alerted emergency services. This two-pronged approach allows for continuous care while waiting for professional assistance, which is vital for improving outcomes in cardiac emergencies. Assessing the situation for a few minutes before taking action can lead to critical delays that might decrease the chances of survival. The Heimlich maneuver is not appropriate in the scenario of performing CPR on an unresponsive infant, as it is meant for clearing airway obstructions rather than addressing cardiac arrest.

7. How should you react if you suspect a spinal injury in a conscious patient?

- A. Minimize movement and keep the patient still until help arrives**
- B. Encourage the patient to move to assess their condition
- C. Comfort the patient by moving them to a safer location
- D. Conduct a full assessment before calling for help

If you suspect a spinal injury in a conscious patient, minimizing movement and keeping the patient still until help arrives is crucial for several reasons. Spinal injuries can lead to serious complications, including paralysis, if the spine is moved or twisted improperly. Stabilizing the patient's condition by limiting movement helps to prevent further injury to the spinal cord and surrounding structures. The spinal cord is vulnerable, and any unnecessary movement can exacerbate an existing injury, potentially leading to irreversible damage. Additionally, keeping the patient still allows emergency personnel to assess the situation without creating additional risks. The priority is to maintain the patient's position until trained medical responders can take over. This approach aligns with best practices in emergency care and reflects a clear understanding of the potential severity of spinal injuries.

8. How many chest compressions should you give per minute to an infant?

- A. 60 compressions
- B. 80 compressions
- C. 100 compressions**
- D. 120 compressions

In infant resuscitation, the recommended rate for chest compressions is 100 to 120 compressions per minute. Specifically, choosing 100 compressions aligns with a commonly used guideline within the necessary range, ensuring that the compressions are effective without significantly compromising the quality of the resuscitation efforts. Maintaining a rhythm of 100 compressions helps to circulate blood effectively during cardiac arrest or serious emergencies and provides enough time for the heart to fill adequately during the relaxation phase. Furthermore, this compression rate is consistent with the guidelines provided by the Canadian Red Cross and other resuscitation organizations. Utilizing a pace within this range enables responders to balance speed with sufficient force, ensuring that infants receive the best chance of recovery through proper blood flow. Thus, selecting 100 compressions per minute is a sound choice in terms of following established resuscitation practices for infants.

9. What is the significance of the BLS assessment triangle?

- A. It helps in quick visual assessment of the patient's airway, breathing, and circulation
- B. It provides a backup plan for CPR
- C. It assists in identifying the presence of a pulse
- D. It is used solely for children

The BLS assessment triangle is a vital tool because it allows responders to quickly and efficiently assess three critical components of a patient's condition: airway, breathing, and circulation. By using this triangle, healthcare providers can make rapid determinations regarding the effectiveness of these functions, which are essential for life. The visual representation of the triangle helps to streamline the assessment process, ensuring that no crucial element is overlooked when evaluating a patient's needs. This is particularly important in emergency situations where every second counts. By focusing on airway, breathing, and circulation collectively, the responder can develop a concise and effective treatment plan that addresses the most urgent problems first. Other options may refer to important concepts related to BLS, but they either do not capture the essence of the assessment triangle or focus too narrowly on specific aspects of emergency care. Thus, understanding the significance of the assessment triangle is fundamental for anyone involved in delivering basic life support.

10. How should rescue breaths be given in BLS?

- A. By using a mechanical ventilator only
- B. Sealing the lips around the person's mouth and providing breaths every 5 to 6 seconds while checking for chest rise
- C. Giving multiple rapid breaths in succession
- D. Using an ambu bag exclusively

Rescue breaths in Basic Life Support should be given by sealing the lips around the person's mouth and providing breaths every 5 to 6 seconds while checking for chest rise. This method is crucial because it ensures that the breaths are delivered slowly and effectively, allowing for adequate oxygenation of the lungs without over-inflation, which can lead to complications such as gastric insufflation or potential harm to the lungs. By monitoring for chest rise, rescuers can confirm that the breaths are being properly delivered and that the air is entering the lungs, which is a key indicator of effective ventilation. This approach is part of the foundational principles of BLS, emphasizing the importance of a controlled and methodical technique when providing rescue breaths to someone who is not breathing but has a pulse. It reflects the need to maintain an appropriate rate of ventilation to optimize oxygen delivery while minimizing the risk of adverse effects.

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://canadianredcrossbls.examzify.com>

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

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