

# Certified Rhythm Analysis Technician (CRAT) Practice Exam (Sample)

## Study Guide



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## **Questions**

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- 1. A PVC that occurs during the relative refractory period is referred to as?**
  - A. Bigeminy**
  - B. A couplet**
  - C. Bundle branch block**
  - D. R-on-T phenomenon**
- 2. Which term indicates the stimulation of electrical current from the pacemaker generator?**
  - A. Triggered**
  - B. Packing spike**
  - C. Atrial capture**
  - D. Over-sense**
- 3. On the ECG graph paper, what do the two large boxes represent in voltage?**
  - A. 1 millivolt**
  - B. 1 centimeter**
  - C. 0.1 millivolt**
  - D. 0.5 millivolt**
- 4. What is the standard rate for the data run during the ECG procedure?**
  - A. A. 50 mm/sec**
  - B. B. 25 mm/sec**
  - C. C. 40 mm/sec**
  - D. D. 20 mm/sec**
- 5. Which phase of the cardiac cycle is characterized by the relaxation of the heart muscle?**
  - A. Systole**
  - B. Diastole**
  - C. Cardiac output**
  - D. QRS complex**

- 6. In the context of ethics, which of the following actions is considered unethical but not necessarily illegal?**
- A. Taking a break when required to monitor patients.**
  - B. Reporting blood pressure results inaccurately.**
  - C. Keeping the door open while performing an ECG.**
  - D. Not maintaining patient records during a shift.**
- 7. What action should be taken in case of a patient exhibiting minor distress during an ECG?**
- A. Document the event and continue with the procedure.**
  - B. Notify the healthcare provider immediately.**
  - C. Require the patient to continue without interruptions.**
  - D. Complete the ECG and then provide care.**
- 8. In a normal sinus rhythm, the sinus node fires at a rate of what?**
- A. 40-60 per minute**
  - B. 61-100 per minute**
  - C. 101-150 per minute**
  - D. 151-180 per minute**
- 9. What is the purpose of the ICD-9 code?**
- A. Diagnostic codes used to ensure that proper treatment is provided for the patient.**
  - B. Billing codes used to ensure reimbursement to the facility where you are employed.**
  - C. Diagnostic codes used to ensure reimbursement by the patient's insurance.**
  - D. Billing codes used to ensure that proper treatment is provided for the patient.**
- 10. When placed correctly, standard limb leads form the Einthoven triangle. These leads are also known as what type of lead?**
- A. Augmented**
  - B. Unipolar**
  - C. Negative**
  - D. Bipolar**

## **Answers**

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

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## **Explanations**

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**1. A PVC that occurs during the relative refractory period is referred to as?**

- A. Bigeminy**
- B. A couplet**
- C. Bundle branch block**
- D. R-on-T phenomenon**

The R-on-T phenomenon refers to a situation where a premature ventricular contraction (PVC) occurs on the T wave of a preceding heartbeat during the relative refractory period of the cardiac cycle. During this time, the myocardial cells are partially depolarized and more susceptible to stimulation, which can lead to aberrant electrical activation and potentially dangerous arrhythmias. The relevance of this phenomenon is critical as it can precipitate more serious arrhythmias, such as ventricular tachycardia or ventricular fibrillation. Recognizing R-on-T is essential in clinical settings, especially in patients with underlying heart conditions or those on certain medications that affect cardiac conduction. The other choices refer to different concepts in cardiology. Bigeminy describes a pattern of arrhythmia where every normal beat is followed by a PVC. A couplet consists of two consecutive PVCs, while a bundle branch block refers to a specific conduction abnormality in the heart's electrical system and is not directly related to the timing of PVCs. Understanding these distinctions further emphasizes the significance of the R-on-T phenomenon in assessing cardiac rhythm disturbances.

**2. Which term indicates the stimulation of electrical current from the pacemaker generator?**

- A. Triggered**
- B. Packing spike**
- C. Atrial capture**
- D. Over-sense**

The term that indicates the stimulation of electrical current from the pacemaker generator is "atrial capture." When a pacemaker sends out an electrical impulse, it can lead to the successful depolarization of the atria, which is referred to as atrial capture. This is a crucial aspect in assessing the effectiveness of a pacemaker, as capture confirms that the electrical signal from the pacemaker is successfully reaching the heart muscle and causing it to contract. In context, triggered refers to a state where the pacemaker generates an impulse in response to sensing a certain rhythm but does not specifically describe the stimulation process itself. Packing spike is a term often used to describe the visual representation of a pacing spike on an ECG but does not directly indicate the action of stimulating the heart. Over-sense occurs when the pacemaker mistakenly detects native heart activity as a signal, potentially leading to inappropriate pacing; it is not relevant to the stimulation of electrical current from the generator. Understanding atrial capture is essential for monitoring the effectiveness of a pacemaker, ensuring that it fulfills its role in maintaining heart rhythm.

**3. On the ECG graph paper, what do the two large boxes represent in voltage?**

- A. 1 millivolt**
- B. 1 centimeter**
- C. 0.1 millivolt**
- D. 0.5 millivolt**

In the context of ECG graph paper, each large box is designed to represent specific voltage levels for accurate reading and interpretation of the cardiac electrical impulses. When looking at the standard calibration of ECG paper, two large boxes correspond to a voltage representation of 1 millivolt. This standard allows technicians and medical professionals to assess the amplitude of the electrical activity of the heart with precision. Understanding this measurement is crucial for identifying abnormal heart rhythms or conditions. The way the large boxes are divided into smaller boxes and their defined measurements further aids in consistently interpreting the amplitude of ECG signals across different recordings. An accurate assessment of voltage is essential for diagnosing and monitoring patients' cardiac health effectively.

**4. What is the standard rate for the data run during the ECG procedure?**

- A. A. 50 mm/sec**
- B. B. 25 mm/sec**
- C. C. 40 mm/sec**
- D. D. 20 mm/sec**

The standard rate for the ECG procedure is 25 mm/sec. This rate is used during the recording of an electrocardiogram to balance the resolution of the waveform and the length of the recording. At this rate, the paper moves quickly enough to allow for clear visualization of the heart's electrical activity, while also ensuring that the full duration of the heartbeats is captured adequately without losing essential detail. While other rates, such as 50 mm/sec, may be used in certain cases to provide a more detailed view of the waveform, the standard for routine ECG procedures is generally accepted as 25 mm/sec. This standardization allows for consistency in reading and interpreting ECGs across different healthcare settings.

**5. Which phase of the cardiac cycle is characterized by the relaxation of the heart muscle?**

- A. Systole**
- B. Diastole**
- C. Cardiac output**
- D. QRS complex**

The phase of the cardiac cycle characterized by the relaxation of the heart muscle is diastole. During diastole, the chambers of the heart fill with blood. This phase follows systole, which is when the heart contracts to pump blood out to the lungs and the rest of the body. During diastole, the heart muscle relaxes, allowing the pressure within the heart to decrease, and blood flows from the atria into the ventricles. This is crucial for maintaining the heart's ability to pump blood effectively. The filling of the heart during diastole is essential for ensuring that there is enough blood available for the next contraction during systole. On the other hand, cardiac output refers to the volume of blood the heart pumps per minute and is not a specific phase of the cardiac cycle. The QRS complex is part of an electrocardiogram and represents the electrical depolarization leading to ventricular contraction, which occurs during systole. Thus, diastole is distinctively recognized as the relaxation phase of the cardiac cycle, allowing the heart to prepare for its next contraction.

**6. In the context of ethics, which of the following actions is considered unethical but not necessarily illegal?**

- A. Taking a break when required to monitor patients.**
- B. Reporting blood pressure results inaccurately.**
- C. Keeping the door open while performing an ECG.**
- D. Not maintaining patient records during a shift.**

Keeping the door open while performing an ECG can be viewed as unethical because it compromises patient privacy and confidentiality. In medical practice, maintaining confidentiality is a core ethical principle, and patients have the right to privacy during sensitive procedures. Leaving the door open may lead to unauthorized individuals overhearing private information or witnessing the ECG process, thus violating this principle. While this action may not be illegal according to healthcare regulations, it can be considered a breach of trust and respect for the patient's dignity. Ethical standards often go beyond legal requirements, focusing on the moral implications of actions and their impact on patient care. In contrast, other choices, like reporting inaccurate blood pressure results, directly breach legal standards due to potential harm to patient care, making those actions unethical and illegal. Similarly, taking a break during patient monitoring or failing to maintain records poses practical challenges, but they do not inherently carry ethical breaches related to patient privacy in the same way that leaving the door open does.

**7. What action should be taken in case of a patient exhibiting minor distress during an ECG?**

- A. Document the event and continue with the procedure.**
- B. Notify the healthcare provider immediately.**
- C. Require the patient to continue without interruptions.**
- D. Complete the ECG and then provide care.**

In the context of an ECG procedure, when a patient exhibits minor distress, notifying the healthcare provider immediately is crucial. This action ensures that the patient's condition is appropriately evaluated by a qualified professional who can determine whether further intervention is required. Minor distress could be indicative of an underlying issue that may necessitate immediate attention, and quick communication can initiate potentially necessary protocols to ensure patient safety. Continuing with the procedure without addressing the distress or postponing care can lead to complications, as the patient's welfare should always be the top priority. Documenting the event, while important, is secondary to ensuring that a healthcare provider is aware of the situation. The focus should be on assessing the patient's condition first, rather than completing the ECG or asking them to continue without interruption, as these actions may compromise their safety and well-being.

**8. In a normal sinus rhythm, the sinus node fires at a rate of what?**

- A. 40-60 per minute**
- B. 61-100 per minute**
- C. 101-150 per minute**
- D. 151-180 per minute**

In normal sinus rhythm, the sinus node, which is the heart's natural pacemaker, typically fires at a rate of 61-100 beats per minute. This range is considered normal for adults at rest and reflects the heart's ability to maintain an appropriate rhythm and rate without external influences or abnormalities. When the sinus node fires within this rate, it leads to the consistent and rhythmic contraction of the heart, ensuring effective blood circulation. Rates below 60 beats per minute may suggest bradycardia, which can indicate various cardiac issues or physiological conditions, while rates above 100 beats per minute indicate tachycardia, which could also be a sign of underlying health problems. Thus, understanding that a firing rate of 61-100 per minute is indicative of a healthy normal sinus rhythm is crucial for rhythm analysis and assessment in clinical practice.

## 9. What is the purpose of the ICD-9 code?

- A. Diagnostic codes used to ensure that proper treatment is provided for the patient.
- B. Billing codes used to ensure reimbursement to the facility where you are employed.
- C. Diagnostic codes used to ensure reimbursement by the patient's insurance.**
- D. Billing codes used to ensure that proper treatment is provided for the patient.

The ICD-9 code primarily serves as a standardized system for diagnostic coding, which is crucial for facilitating communication regarding patient diagnoses among healthcare providers and insurers. By coding diagnoses with ICD-9, healthcare professionals can effectively communicate the nature of a patient's condition, allowing for appropriate treatments to be identified and recommended. Additionally, these codes are vital for insurance reimbursement processes, as they provide a clear representation of the clinical rationale behind medical billing. In this context, the selection correctly identifies that the primary purpose of ICD-9 codes is to ensure that reimbursement by the patient's insurance is appropriately processed, linking the diagnosis directly to the billing for services rendered. This is essential not only for the financial viability of healthcare institutions but also for maintaining accurate health records for ongoing patient care. The integration of coding in the billing process facilitates a seamless transaction between healthcare providers and payers, balancing the need for effective treatment with the economic aspects of healthcare provision.

## 10. When placed correctly, standard limb leads form the Einthoven triangle. These leads are also known as what type of lead?

- A. Augmented
- B. Unipolar
- C. Negative
- D. Bipolar**

Standard limb leads, when positioned appropriately on a patient, do indeed create what is known as the Einthoven triangle. These leads are classified as bipolar leads because they measure the electrical potential difference between two electrodes. In a bipolar lead system, one electrode serves as a positive (positive pole) and the other as a negative (negative pole). The standard limb leads (lead I, II, and III) take readings from two of the limb electrodes each, with one serving as the positive and the other as the negative for each lead. This configuration is crucial because it allows for the capture of electrical activity from the heart in different perspectives, which is essential for accurately interpreting the cardiac rhythm and detecting any abnormalities. The distinction of being bipolar is important especially when comparing to other lead types, such as unipolar leads, which use a single positive electrode and reference the potential to a neutral point. In summary, standard limb leads forming the Einthoven triangle being recognized as bipolar leads indicates that they rely on the relative voltages between two electrodes to produce meaningful electrocardiographic readings.