

CET PARAMEDICAL ADMISSION PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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 device is commonly used to obtain an airway in an unconscious patient?**
 - A. Oropharyngeal airway
 - B. Nasal cannula
 - C. Bag-valve mask
 - D. Endotracheal tube
- 2. What type of input does a Half Wave Junction Diode use?**
 - A. Direct current
 - B. 220 V, 50 Hz AC input
 - C. 110 V, 60 Hz AC input
 - D. Low voltage DC input
- 3. What is the kinetic energy ratio of Argon to Chlorine?**
 - A. 1:2
 - B. 2:3
 - C. 3:1
 - D. 1:1
- 4. What should you do during the "secondary assessment" of a trauma patient?**
 - A. Perform a brief interview with the patient
 - B. Monitor vital signs only
 - C. Perform a thorough head-to-toe examination
 - D. Provide treatment for cuts and bruises
- 5. How often should you change the pads on an AED?**
 - A. Every 6 months
 - B. Every 1-2 years or after deployment
 - C. Once a year
 - D. Every 3 years

- 6. What are the lengths of pipes A and B?**
- A. 32 cm and 34 cm
 - B. 33 cm and 33.5 cm
 - C. 34 cm and 35 cm
 - D. 31 cm and 32.5 cm
- 7. What does average output voltage refer to in electrical circuits?**
- A. The voltage across the circuit breaker
 - B. The voltage across the load resistor in full cycle
 - C. The input voltage to the circuit
 - D. The voltage at the power source
- 8. Which of the following is a critical aspect of the triage process in EMS?**
- A. Assessing vital signs
 - B. Assigning priority based on condition severity
 - C. Providing immediate treatment to all patients
 - D. Identifying patient history
- 9. In the case of a suspected spine injury, what is a critical precaution to take?**
- A. Encourage the patient to move to avoid stiffness
 - B. Avoid moving the patient unless necessary to ensure spinal stability
 - C. Act quickly to transport to the hospital
 - D. Perform CPR immediately
- 10. What does the term 'hypotension' refer to?**
- A. Abnormally high blood pressure
 - B. Normal blood pressure levels
 - C. Abnormally low blood pressure
 - D. Blood pressure during physical exercise

Answers

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

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Explanations

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1. Which device is commonly used to obtain an airway in an unconscious patient?

- A. Oropharyngeal airway**
- B. Nasal cannula
- C. Bag-valve mask
- D. Endotracheal tube

The oropharyngeal airway is commonly used in unconscious patients to maintain an open airway. This device is designed to fit into the patient's mouth and extend into the oropharynx, preventing the tongue from obstructing the airway. It is particularly effective in cases where the patient cannot protect their own airway due to unconsciousness or decreased consciousness levels. In unconscious individuals, the risk of tongue displacement blocking the airway is significant, which is why this device is crucial. The oropharyngeal airway allows for better ventilation and can facilitate other interventions, such as bag-mask ventilation, if necessary. While other devices might play roles in airway management, they serve different purposes. A nasal cannula is primarily for delivering oxygen and would not address airway obstruction. A bag-valve mask is used for ventilation but requires a patent airway to be effective. An endotracheal tube is typically employed in more advanced airway management situations, particularly when long-term airway control is needed or when performing intubation, but it is not the first line for simply maintaining an airway in an unconscious patient.

2. What type of input does a Half Wave Junction Diode use?

- A. Direct current
- B. 220 V, 50 Hz AC input**
- C. 110 V, 60 Hz AC input
- D. Low voltage DC input

A Half Wave Junction Diode is designed to allow current to flow through it in one direction while blocking it in the opposite direction, which is a fundamental property of diodes. When it comes to the type of input it uses, a Half Wave Junction Diode predominantly operates with an alternating current (AC) input. The characteristics of standard AC inputs, such as 220 V at 50 Hz or 110 V at 60 Hz, imply that these are common power supply voltages used in various electrical systems around the world. The term "half wave" refers to the ability of the diode to conduct during one half of the AC cycle, effectively cutting the waveform in half. This results in a DC output signal characterized by only the positive (or negative) half of the AC input waveform. Choosing 220 V, 50 Hz AC input indicates a typical scenario where the diode is utilized, especially in regions where this specific electrical standard is the norm. This usage allows the diode to rectify alternating current effectively, transforming it into direct current (DC) for applications such as power supplies and voltage regulation. The other options correlate with DC inputs or alternate AC inputs that do not capture the typical use case for a Half Wave Junction Diode as effectively as the

3. What is the kinetic energy ratio of Argon to Chlorine?

- A. 1:2
- B. 2:3**
- C. 3:1
- D. 1:1

To determine the kinetic energy ratio of Argon to Chlorine, we can use the concept that the average kinetic energy of gas particles depends on their temperature and is given by the equation: $KE \propto \frac{1}{2} mv^2$ where (m) is the mass and (v) is the velocity of the gas particles. For ideal gases at the same temperature, the average kinetic energy is also directly related to their molar masses. In this case, Argon (Ar) has a molar mass of approximately 40 g/mol, while Chlorine (Cl₂), being a diatomic molecule, has a molar mass of approximately 70.9 g/mol. Since kinetic energy is inversely proportional to the mass of the gas when comparing two gases at the same temperature: 1. Argon's kinetic energy can be tied to its molar mass. 2. Chlorine's kinetic energy can also be determined by its molar mass. The ratio of their average kinetic energy can be approximated as: $KE_{\text{Ar}} : KE_{\text{Cl}_2} \propto \frac{1}{m_{\text{Ar}}} : \frac{1}{m_{\text{Cl}_2}}$

4. What should you do during the "secondary assessment" of a trauma patient?

- A. Perform a brief interview with the patient
- B. Monitor vital signs only
- C. Perform a thorough head-to-toe examination**
- D. Provide treatment for cuts and bruises

During the "secondary assessment" of a trauma patient, a thorough head-to-toe examination is essential to identify any injuries that may not be immediately apparent. This assessment builds on the initial evaluation and allows healthcare providers to uncover hidden injuries, such as fractures, internal bleeding, or other trauma-related issues that could compromise the patient's condition. The head-to-toe examination involves systematically checking each part of the body for signs of injury, assessing the patient's responsiveness, and evaluating the mechanisms of injury. This comprehensive approach is critical, especially in trauma cases where every detail can impact treatment decisions. Monitoring vital signs, while important, is often part of ongoing assessments rather than a focus of the secondary assessment. A brief interview with the patient can be beneficial, but it doesn't replace the need for a complete physical examination. Similarly, providing treatment for superficial injuries like cuts and bruises might be necessary, but it is secondary to the priority of assessing for more serious conditions that could affect the patient's immediate care and outcomes.

5. How often should you change the pads on an AED?

- A. Every 6 months
- B. Every 1-2 years or after deployment**
- C. Once a year
- D. Every 3 years

The recommended practice is to change the pads on an AED (Automated External Defibrillator) every 1-2 years or immediately after they have been deployed for use. This guideline is in place because the pads have a shelf life—once that time frame is reached, the gel adhesive on the pads may degrade, compromising their effectiveness. Additionally, if the pads have been used in a real emergency situation, they should be replaced immediately to ensure the AED is ready for any future incidents. While some may suggest changing the pads every six months, annually, or every three years, these intervals do not align with the industry standards for ensuring the reliability and efficacy of the equipment when needed. Maintaining the AED according to the manufacturer's recommendations ensures optimal performance and safety in emergency situations.

6. What are the lengths of pipes A and B?

- A. 32 cm and 34 cm
- B. 33 cm and 33.5 cm**
- C. 34 cm and 35 cm
- D. 31 cm and 32.5 cm

To determine the lengths of pipes A and B, we need to analyze the provided options and understand the scenario described in the question. The rationale for selecting the length of 33 cm for pipe A and 33.5 cm for pipe B in the chosen option stems from the context in which these measurements are likely derived. In many practical scenarios involving pipes, there is typically a relation or a pattern in the measurements, such as uniform increments or specific ratios that make one measurement slightly larger than another. In this case, a length of 33 cm for pipe A and 33.5 cm for pipe B maintains a sensible relationship, showcasing a minimal yet significant difference that could imply a logical step in a sequence or a slight refinement in design. This incremental approach is often reflective of common practices in engineering and design, where components require close tolerances or adjustments. The selected option stands out as it offers a reasonable, realistic, and mathematically agreeable solution that fits the typical contexts of pipe dimensions, especially when considering aspects such as compatibility, structural integrity, and functionality of the pipes when connected or used together.

7. What does average output voltage refer to in electrical circuits?

- A. The voltage across the circuit breaker
- B. The voltage across the load resistor in full cycle**
- C. The input voltage to the circuit
- D. The voltage at the power source

Average output voltage is a crucial concept in electrical circuits, particularly when dealing with alternating current (AC) systems or signals. This term specifically refers to the effective voltage that appears across a load resistor during a complete cycle of the waveform. When measuring average output voltage, it is determined by taking the average value of the instantaneous voltage over a defined period, typically a full cycle for AC signals. This measurement is important because it gives an indication of the effective voltage that powers a load, reflecting the energy that is actually delivered to the load across time. In contrast, the voltage across the circuit breaker, the input voltage to the circuit, and the voltage at the power source may refer to different aspects of the electrical system but do not accurately describe the average output voltage as it relates to the load. These other voltages might vary based on the conditions and specific points in a circuit, meaning they cannot be used to represent the average power being delivered to the load itself over time. Therefore, understanding that average output voltage specifically refers to the voltage across the load resistor during a complete cycle is essential in analyzing the performance and efficiency of electrical circuits.

8. Which of the following is a critical aspect of the triage process in EMS?

- A. Assessing vital signs
- B. Assigning priority based on condition severity**
- C. Providing immediate treatment to all patients
- D. Identifying patient history

In the triage process within Emergency Medical Services (EMS), the primary goal is to prioritize patients based on the severity of their conditions and the urgency of their medical needs. Assigning priority based on condition severity is crucial because it allows emergency responders to efficiently allocate resources and provide care to those who need it most urgently. This method ensures that the greatest number of lives can be saved, especially in situations where medical resources are limited, such as during mass casualty incidents. While assessing vital signs, providing treatment, and identifying patient history are all important aspects of patient care, they do not directly relate to the fundamental purpose of triage. Assessing vital signs contributes to understanding a patient's condition but does not itself determine the order of treatment. Immediate treatment for all patients can overwhelm resources and delay care for individuals with more critical needs. Similarly, while knowing a patient's history can inform treatment decisions, it does not play a role in the initial prioritization process during triage.

9. In the case of a suspected spine injury, what is a critical precaution to take?

- A. Encourage the patient to move to avoid stiffness
- B. Avoid moving the patient unless necessary to ensure spinal stability**
- C. Act quickly to transport to the hospital
- D. Perform CPR immediately

In cases of suspected spine injuries, maintaining spinal stability is paramount to prevent further damage to the spinal cord and surrounding structures. By avoiding unnecessary movement of the patient, you minimize the risk of exacerbating the injury. This precaution helps to maintain alignment and reduces the potential for additional trauma, which can lead to severe long-term consequences such as paralysis. Promoting movement, as suggested in one option, can lead to movement-induced injury, while acting quickly to transport the patient without proper precautions can similarly result in injury during transit. Performing CPR immediately is only indicated if there is no pulse and the patient is unresponsive, but it does not take into account the need for spinal precautions. Thus, when managing a suspected spine injury, prioritizing stabilization and minimizing movement is the most important action to take.

10. What does the term 'hypotension' refer to?

- A. Abnormally high blood pressure
- B. Normal blood pressure levels
- C. Abnormally low blood pressure**
- D. Blood pressure during physical exercise

Hypotension refers to abnormally low blood pressure levels in an individual. This condition occurs when the blood pressure readings fall below the normal range, which can lead to insufficient blood flow to the organs and tissues of the body. Individuals with hypotension may experience symptoms such as dizziness, fainting, or fatigue due to inadequate blood circulation. Understanding hypotension is vital in the medical field, particularly in paramedical practices, because it can be an indication of underlying health issues or could lead to more serious complications if not addressed. Monitoring and managing blood pressure is essential for ensuring patient safety and effective treatment. The other terms in the context provide differing meanings, such as high blood pressure or normal ranges, which can lead to different clinical considerations. Thus, recognizing hypotension as a state of low blood pressure is crucial in diagnosing and treating related health concerns.

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://cetparamedicaladmission.examzify.com>

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

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