

Chicago EMS System Policies Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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. What is the role of the Alternate EMS System Medical Director?**
 - A. Responsible for the management of the EMS System Program Plan under the EMS System Medical Director.**
 - B. Responsible for the day-to-day operations of the system.**
 - C. Oversees training programs across all hospitals.**
 - D. Manages data evaluation and quality assurance.**

- 2. What is the role of the EMS Medical Directors Consortium in the POLST policy?**
 - A. They coordinate EMS field operations.**
 - B. They manage hospital transfer referrals.**
 - C. They approve the policy and ensure it is effective.**
 - D. They handle patient billing disputes.**

- 3. What details are included in the Background section of I-SBAR?**
 - A. Age and sex only.**
 - B. Current vital signs.**
 - C. Medications and allergies.**
 - D. Age, sex, medical history, trauma details, pertinent past medical history, medications, and allergies.**

- 4. What is the role of the EMS Medical Directors Consortium?**
 - A. They approve policies such as the Field to Hospital Communication policy**
 - B. They set hospital accreditation standards**
 - C. They manage ambulance procurement**
 - D. They oversee EMS dispatch operations**

- 5. Which ambulance transports the patient when care is transferred from BLS to ALS?**
 - A. The BLS ambulance will transport the patient.**
 - B. The patient will be transported by private vehicle.**
 - C. The hospital transport team will transport the patient.**
 - D. The ALS ambulance will transport the patient.**

- 6. Which scenario best demonstrates adherence to the EMS Scope of Practice?**
- A. A paramedic performing a procedure beyond their authorized duties.**
 - B. A dispatcher altering triage protocols without authorization.**
 - C. A clinician performing only the duties defined by the scope of practice.**
 - D. A nurse outside EMS supervising EMS crews.**
- 7. What action is recommended when ALS backup is needed because the transport time is long?**
- A. Continue with the current plan and wait for ALS**
 - B. Decline ALS backup**
 - C. Consult with OLMC for ALS backup or rapid transport if ALS is delayed**
 - D. Cancel transport**
- 8. What certifications must Tier II personnel maintain?**
- A. ACLS and BLS only**
 - B. ACLS, PEPP or PALS**
 - C. PEPP or PALS and ITLS or PHTLS**
 - D. ACLS, PEPP or PALS, ITLS or PHTLS**
- 9. Which certifications must Tier III RN personnel maintain?**
- A. BLS only**
 - B. ACLS**
 - C. EMT-B certification**
 - D. ACLS, PEPP, PALS, NRP or equivalent, ITLS, PHTLS, TNCC or TNC**
- 10. What does the 'Rx' in I-SBAR refer to?**
- A. Treatment initiated, including procedures performed, medications given, and patient response.**
 - B. Radiology results.**
 - C. Referral to other services.**
 - D. Response time analysis.**

Answers

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

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Explanations

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1. What is the role of the Alternate EMS System Medical Director?

- A. Responsible for the management of the EMS System Program Plan under the EMS System Medical Director.**
- B. Responsible for the day-to-day operations of the system.**
- C. Oversees training programs across all hospitals.**
- D. Manages data evaluation and quality assurance.**

The key idea being tested is who maintains the EMS system's daily functioning when the primary Medical Director isn't available. The Alternate EMS System Medical Director is responsible for the day-to-day operations of the system, ensuring that routine activities run smoothly, policies are implemented consistently, and clinical oversight continues without interruption. This role keeps the system functioning on a practical, operational level—overseeing field coordination, ensuring adherence to protocols, and addressing immediate medical direction needs as issues arise. This focus on daily operations distinguishes it from roles more about strategic planning or program management, which would fall under the primary EMS System Medical Director or other designated leaders. It also differs from duties like overseeing training programs across hospitals or managing data evaluation and quality assurance, which align with education and QA/PI functions rather than daily operational leadership.

2. What is the role of the EMS Medical Directors Consortium in the POLST policy?

- A. They coordinate EMS field operations.**
- B. They manage hospital transfer referrals.**
- C. They approve the policy and ensure it is effective.**
- D. They handle patient billing disputes.**

The role of the EMS Medical Directors Consortium is to oversee medical policy within the EMS system, including POLST policies. They review and approve the POLST policy to ensure it aligns with medical ethics, legal requirements, and the goal of honoring patient wishes in the field. Beyond approval, they implement oversight to make the policy effective: they set how training is delivered to EMS personnel, determine how the policy will be communicated and applied across agencies, and establish mechanisms to monitor compliance and outcomes, such as audits and feedback processes. This governance approach ensures a consistent, patient-centered application of POLST across the EMS system. Tasks like coordinating day-to-day field operations, managing hospital transfer referrals, and handling patient billing disputes are addressed by operational leadership, hospital coordination teams, and administrative or financial departments, respectively, rather than by the medical directors consortium.

3. What details are included in the Background section of I-SBAR?

- A. Age and sex only.**
- B. Current vital signs.**
- C. Medications and allergies.**
- D. Age, sex, medical history, trauma details, pertinent past medical history, medications, and allergies.**

The Background section is where you give the receiver the patient's context to guide immediate care. It should include who the patient is (age and sex) and the information that can influence treatment: their medical history, any pertinent past medical history, details about any trauma if relevant, the medications they are taking, and any allergies. These items help clinicians anticipate contraindications, potential complications, and the overall baseline from which the current situation is evaluated. Current vital signs and the reason for transport are typically addressed in the Situation or Assessment sections, not in Background. So, including age, sex, medical history, trauma details, pertinent past medical history, medications, and allergies provides the most complete and useful background.

4. What is the role of the EMS Medical Directors Consortium?

- A. They approve policies such as the Field to Hospital Communication policy**
- B. They set hospital accreditation standards**
- C. They manage ambulance procurement**
- D. They oversee EMS dispatch operations**

The main idea here is who steers the tangible resources that enable prehospital care. The EMS Medical Directors Consortium functions as a coordinated group of medical directors who ensure that the fleet and equipment used in EMS are aligned with clinical needs and patient safety. Because ambulances are the primary platform for delivering care on scene and en route to the hospital, deciding how those vehicles and their gear are procured is a central responsibility. They evaluate what types of ambulances are appropriate (basic vs. advanced life support), set standards for equipment and safety, select vendors, negotiate contracts, and plan the fleet's lifecycle and maintenance. This focus on securing and standardizing the vehicles and gear that clinicians rely on is why managing ambulance procurement is the best answer. Hospitals' accreditation standards aren't set by the EMS medical directors consortium; those standards come from hospital accreditation bodies. Dispatch operations are managed by the communications and EMS dispatch leadership, with medical directors informing policy but not running dispatch. Approving policies like field-to-hospital communication can be part of broader policy work, but the consortium's primary, explicit role is related to procurement and fleet management, which directly supports clinical care in the field.

5. Which ambulance transports the patient when care is transferred from BLS to ALS?

- A. The BLS ambulance will transport the patient.**
- B. The patient will be transported by private vehicle.**
- C. The hospital transport team will transport the patient.**
- D. The ALS ambulance will transport the patient.**

When care is handed off from BLS to ALS, the ambulance carrying the ALS crew becomes responsible for transporting the patient. The ALS unit has the advanced skills, equipment, and medications needed to continue definitive care during transport, such as airway management, IV therapy, medications, and continuous monitoring. Assigning transport to the ALS unit ensures seamless care and safety in transit, since they already established the higher level of care on scene and are equipped to monitor and manage any changes en route. The BLS unit may assist or stand by, but typically does not continue transport when ALS has taken over. Using a private vehicle would lack proper medical staffing and equipment, and hospital transport teams are not the standard prehospital transport solution in this scenario.

6. Which scenario best demonstrates adherence to the EMS Scope of Practice?

- A. A paramedic performing a procedure beyond their authorized duties.**
- B. A dispatcher altering triage protocols without authorization.**
- C. A clinician performing only the duties defined by the scope of practice.**
- D. A nurse outside EMS supervising EMS crews.**

Staying within the EMS Scope of Practice means performing only the tasks you are trained, certified, and authorized to do under medical oversight and agency protocols. The scenario that best demonstrates adherence is the clinician who performs only the duties defined by the scope, because it follows approved responsibilities, keeps patient care within proven boundaries, and protects both patient safety and legal accountability. The other scenarios push beyond or outside those boundaries: a paramedic performing procedures beyond authorization, a dispatcher altering triage protocols without approval, and a nurse outside EMS supervising EMS crews—all of which violate the scope and can lead to unsafe care and liability.

7. What action is recommended when ALS backup is needed because the transport time is long?

- A. Continue with the current plan and wait for ALS**
- B. Decline ALS backup**
- C. Consult with OLMC for ALS backup or rapid transport if ALS is delayed**
- D. Cancel transport**

When a long transport time means ALS backup is needed, the right move is to check in with Online Medical Control to arrange ALS backup or authorize rapid transport if ALS would be delayed. Online Medical Control can coordinate an ALS intercept with another unit or adjust the plan to get the patient advanced care more quickly. This ensures the patient receives necessary ALS interventions without waiting unnecessarily, and it keeps the transfer moving toward definitive care in a timely way. Sticking with the current plan and waiting for ALS, declining backup, or canceling transport could leave the patient without critical care or delay needed treatment.

8. What certifications must Tier II personnel maintain?

- A. ACLS and BLS only**
- B. ACLS, PEPP or PALS**
- C. PEPP or PALS and ITLS or PHTLS**
- D. ACLS, PEPP or PALS, ITLS or PHTLS**

Tier II personnel must be prepared to handle a broad range of emergencies across three main areas: adult cardiac/medical emergencies, pediatric care, and trauma situations. That means maintaining ACLS for adults, plus a pediatric certification (PEPP or PALS), and a trauma-focused certification (ITLS or PHTLS). This combination ensures you're equipped for the key scenarios you'll encounter in the field. The reason this set is the best fit is that it covers all three essential domains. One option would only include ACLS and basic life support, missing pediatric and trauma aspects. Another option includes ACLS and a pediatric credential but omits trauma. A third includes pediatric and trauma credentials but lacks ACLS. Only the full trio—ACLS along with a pediatric certification and a trauma certification—provides comprehensive preparedness for Tier II roles.

9. Which certifications must Tier III RN personnel maintain?

- A. BLS only**
- B. ACLS**
- C. EMT-B certification**
- D. ACLS, PEPP, PALS, NRP or equivalent, ITLS, PHTLS, TNCC or TNC**

Tier III RN personnel must maintain a comprehensive set of certifications in adult, pediatric, neonatal, and trauma care to be prepared for a wide range of emergencies and to ensure safe, effective handoffs in the EMS system. This collection—ACLS for adult life support, PEPP and PALS for pediatric life support, NRP or an equivalent neonatal program, ITLS and PHTLS for prehospital trauma care, and TNCC or its equivalent for trauma nursing—ensures competency across the lifespan and in traumatic events. Relying on BLS alone or on a single certification like ACLS would leave gaps in pediatric, neonatal, and trauma management, and EMT-B certification is not sufficient for Tier III RN responsibilities.

10. What does the 'Rx' in I-SBAR refer to?

- A. Treatment initiated, including procedures performed, medications given, and patient response.**
- B. Radiology results.**
- C. Referral to other services.**
- D. Response time analysis.**

Rx in this context captures what you did for the patient: the treatments started, procedures performed, medications given, and how the patient responded. It's the action-and-response snapshot that lets the next clinician continue care without repeating steps or missing what's been done. For example, you might say that IV access was established, analgesia administered, antibiotics started if indicated, and that the patient's pain decreased with stable vital signs after the intervention. Radiology results describe findings from tests and are information to be communicated separately; they don't reflect actions taken. Referrals and response-time metrics are planning or process details, not the immediate treatment actions and patient response described in Rx.

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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://chicagoemssyspolicies.examzify.com>

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

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