First Aid and CPR/AED Level C Practice Exam (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

1. **During CPR for an adult, how many chest compressions are delivered before the first rescue breath?**

   A. 15 compressions

   B. 5 compressions

   C. 30 compressions

   D. 2 compressions

2. **After a tick bite, which action helps monitor potential infection?**

   A. Wash with clean running water.

   B. Save tick in resealable bag and record date of bite.

   C. Do nothing for several days.

   D. Apply alcohol swab to bite.

3. **What is the first action you should take if you suspect a heart attack?**

   A. Have the person rest

   B. If available, administer aspirin

   C. If person has chest pain prescribed medications, help to take

   D. Call EMS and get AED

4. **What is the step that follows removing the cap when using an inhaler (without a spacer)?**

   A. Shake inhaler 3-4 times

   B. Bring inhaler to mouth

   C. Breathe out as much air as possible, away from inhaler

   D. Press top of inhaler while taking a slow breath

5. **When applying a splint, which instruction is correct?**

   A. Check Temperature and Color of Skin Below Injured Area Before and After Splinting

   B. Pad Rigid or Anatomical Splints

   C. Remove Jewelry Below Site of Injury

   D. Splint the Injured Part in the Position in Which It Was Found

6. After calling EMS for suspected stroke, what should you do if the person is unresponsive or having difficulty swallowing?

A. Place in recovery position

B. Give water to swallow

C. Start CPR immediately

D. Continue to stand and monitor

7. Which maneuver is described as five quick thrusts inward and upward into the abdomen?

A. Back blows

B. Chest thrusts

C. Chest compressions

D. Abdominal thrusts

8. When applying a binder for an arm injury, what is the final step?

A. Check circulation

B. Tie bandage at uninjured side

C. Wrap broad bandage around injured arm & body

D. Apply binder

9. Which symptom is NOT typically associated with heat exhaustion?

A. Headache

B. Dry, hot skin

C. Weakness

D. Dizziness

10. When is a hemostatic bandage recommended?

A. Use on parts of the body where tourniquet cannot be applied or if tourniquet fails

B. Always replace with a tourniquet first

C. Only for minor bleeding

D. Used after applying ointment

Answers

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

Explanations

1. During CPR for an adult, how many chest compressions are delivered before the first rescue breath?

A. 15 compressions

B. 5 compressions

C. 30 compressions

D. 2 compressions

In adult CPR the priority is to keep blood circulating to the brain and heart. Chest compressions restore that circulation, while rescue breaths oxygenate the blood once circulation is underway. For a single rescuer, the standard pattern is 30 chest compressions followed by 2 rescue breaths. So the first rescue breath comes after 30 compressions. Aim for a rate of about 100–120 compressions per minute and a depth of about 2 inches (5 cm). If an advanced airway is in place, breaths are given every 6 seconds while compressions continue.

2. After a tick bite, which action helps monitor potential infection?

A. Wash with clean running water.

B. Save tick in resealable bag and record date of bite.

C. Do nothing for several days.

D. Apply alcohol swab to bite.

Saving the tick in a resealable bag and recording the date of the bite is the best way to monitor potential infection because it preserves a specimen and creates a timeline for the bite. If symptoms develop later, you or a clinician can identify the tick species and assess how long it was attached, which helps determine the risk of tick-borne illness. The date provides a reference for when transmission could have occurred and guides follow-up actions. Other steps like washing the area, or applying alcohol, focus on cleaning or disinfection but don't give clinicians the information needed to evaluate infection risk or timing of possible disease transmission. Keeping the tick and noting the bite date keeps options open for accurate assessment if symptoms appear.

3. What is the first action you should take if you suspect a heart attack?

A. Have the person rest

B. If available, administer aspirin

C. If person has chest pain prescribed medications, help to take

D. Call EMS and get AED

Suspecting a heart attack is a time-critical emergency, so the first action is to activate emergency services and get an automated external defibrillator on the scene. Prompt professional help ensures rapid assessment, monitoring, and the chance of defibrillation if the rhythm becomes shockable. An AED on site can be life-saving, especially if the person deteriorates into cardiac arrest. While you wait for responders, you can keep the person calm and comfortable, and if there are no contraindications and you're advised by EMS, you may offer aspirin and assist with prescribed medications, but these steps should not delay contacting emergency services.

4. What is the step that follows removing the cap when using an inhaler (without a spacer)?

A. Shake inhaler 3-4 times

B. Bring inhaler to mouth

C. Breathe out as much air as possible, away from inhaler

D. Press top of inhaler while taking a slow breath

Coordinating inhalation with actuation and preparing the lungs for medicine delivery are the skills being tested. After removing the cap, you should empty your lungs by exhaling completely away from the inhaler. This ensures your lungs start from a low volume so you can take a slow, deep breath as you actuate the inhaler, maximizing the amount of medicine that reaches the lower airways. Exhaling first also helps keep moisture and saliva out of the mouthpiece, reducing disturbance to the spray. Once you've exhaled, bring the inhaler to your mouth, seal your lips, and then press the top of the inhaler while continuing a slow, deep breath, followed by a breath-hold if possible.

5. When applying a splint, which instruction is correct?

A. Check Temperature and Color of Skin Below Injured Area Before and After Splinting

B. Pad Rigid or Anatomical Splints

C. Remove Jewelry Below Site of Injury

D. Splint the Injured Part in the Position in Which It Was Found

Immobilizing the injury in the position found is the most important principle when applying a splint. Keeping the limb in its original position helps preserve alignment and reduces the risk of worsening damage to bones, joints, nerves, and blood vessels. Repositioning the limb can cause additional injury and complicate later treatment, so you should avoid straightening or moving it unless there is an immediate danger (for example, to clear a pathway or to prevent airway obstruction). After placing the splint, secure it well and monitor distal circulation, sensation, and movement, padding pressure points as needed and addressing swelling (which may include loosening or removing jewelry if it could become constrictive).

6. After calling EMS for suspected stroke, what should you do if the person is unresponsive or having difficulty swallowing?

A. Place in recovery position

B. Give water to swallow

C. Start CPR immediately

D. Continue to stand and monitor

Protecting the airway is the priority when stroke is suspected. If the person becomes unresponsive or has difficulty swallowing, place them on their side in the recovery position. This keeps the airway open, prevents the tongue from blocking the airway, and allows any saliva, blood, or vomit to drain out instead of accumulating in the throat or lungs. It reduces the risk of aspiration and makes breathing safer while you wait for EMS. Do not give anything by mouth, including water, and continue to monitor the person closely. If they stop breathing normally or there is no pulse, start CPR immediately.

7. Which maneuver is described as five quick thrusts inward and upward into the abdomen?

A. Back blows

B. Chest thrusts

C. Chest compressions

D. Abdominal thrusts

Abdominal thrusts relieve a choking airway obstruction in a conscious person by creating a quick surge of air from the lungs. The maneuver delivers five rapid inward and upward thrusts into the abdomen, just above the navel, to compress the air and push the obstructing object out of the airway. This sudden pressure dislodges what's blocking the airway, making it the correct technique described. It's distinct from back blows, which strike the back to loosen the object; chest thrusts, which push on the chest and are used when abdominal thrusts aren't safe or appropriate; and chest compressions, which are for CPR to circulate blood rather than clear an airway.

8. When applying a binder for an arm injury, what is the final step?

A. Check circulation

B. Tie bandage at uninjured side

C. Wrap broad bandage around injured arm & body

D. Apply binder

The final step is to check circulation in the hand and fingers beyond the binder. After you wrap and secure the binder, verify that blood flow isn't being restricted. Look for normal color and warmth, and have the person move their fingers to ensure sensation and movement are present. If you notice pale or blue skin, coldness, numbness, tingling, or reduced movement, loosen or adjust the wrap and recheck circulation. Continuous monitoring is essential to make sure the binder isn't cutting off blood flow.

9. Which symptom is NOT typically associated with heat exhaustion?

A. Headache

B. Dry, hot skin

C. Weakness

D. Dizziness

Heat exhaustion shows up when the body is overstressed by heat but still has active cooling from sweating. Because sweating is present, the skin is usually cool and moist, not dry and hot. Common symptoms you'd expect with heat exhaustion include headache, weakness, and dizziness, all tied to dehydration and reduced blood flow. Dry, hot skin, on the other hand, signals a failure of the cooling system that's characteristic of heat stroke, a more severe condition requiring emergency care. So the symptom that isn't typical of heat exhaustion is dry, hot skin. If you suspect heat exhaustion, help the person cool down, hydrate if able, and monitor for worsening signs that could indicate heat stroke.

10. When is a hemostatic bandage recommended?

A. Use on parts of the body where tourniquet cannot be applied or if tourniquet fails

B. Always replace with a tourniquet first

C. Only for minor bleeding

D. Used after applying ointment

Hemostatic bandages are used when you can't apply a tourniquet or when a tourniquet has not controlled the bleeding. They contain agents that help blood clot faster, making them useful for severe bleeding in areas where a tourniquet isn't feasible or has failed to work. In practice, you'd use a hemostatic bandage after attempting direct pressure and in situations where a tourniquet can't be placed on the wound or isn't effective, to help stop the hemorrhage. This isn't for minor bleeding, it's not a default replacement for a tourniquet, and it isn't specifically tied to applying ointment beforehand.

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://firstaidcpraedlevelc.examzify.com

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