

# FISDAP EMT Airway Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

**Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.**

**ALL RIGHTS RESERVED.**

**No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.**

**Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.**

**SAMPLE**

# Table of Contents

<b>Copyright</b> .....	<b>1</b>
<b>Table of Contents</b> .....	<b>2</b>
<b>Introduction</b> .....	<b>3</b>
<b>How to Use This Guide</b> .....	<b>4</b>
<b>Questions</b> .....	<b>5</b>
<b>Answers</b> .....	<b>8</b>
<b>Explanations</b> .....	<b>10</b>
<b>Next Steps</b> .....	<b>16</b>

# 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. What is the primary function of alveoli in the lungs?**
  - A. Transport oxygen to the blood**
  - B. Facilitate gas exchange**
  - C. Support lung structures**
  - D. Warm air entering the lungs**
- 2. What is the most likely cause of sharp chest pain and cyanosis in an 18-year-old male after weight lifting?**
  - A. Myocardial Infarction**
  - B. Spontaneous Pneumothorax**
  - C. Pulmonary Embolism**
  - D. Pneumonia**
- 3. A 56-year-old female is struggling to breathe with wheezing and is unable to hold her head up. What should you do?**
  - A. Provide oxygen**
  - B. Check airway for foreign body obstructions**
  - C. Administer medication**
  - D. Start CPR**
- 4. What position would typically help a patient experiencing severe respiratory distress?**
  - A. Supine**
  - B. Fowler's position**
  - C. Prone**
  - D. Lateral recumbent**
- 5. Why is it important to secure the airway with tape or a device?**
  - A. To improve the patient's comfort during transport**
  - B. To prevent dislodgment of the airway adjunct during transport**
  - C. To facilitate easier access for medical personnel**
  - D. To provide a clear pathway for intubation**

- 6. Which oxygen delivery method is most effective for a patient with severe hypoxia?**
- A. Nasal cannula**
  - B. Simple face mask**
  - C. Nonrebreather mask**
  - D. Venturi mask**
- 7. Why do EMTs measure blood pressure and assess for perfusion during airway interventions?**
- A. To evaluate the overall hemodynamic status affecting oxygen delivery**
  - B. To calculate the patient's BMI for assessment**
  - C. To identify signs of infection in the patient**
  - D. To determine the patient's blood type for transfusion**
- 8. What is the term for abnormal breath sounds resulting from an obstructed airway during inspiration?**
- A. Wheezing**
  - B. Stridor**
  - C. Ronchi**
  - D. Rales**
- 9. Which is an indication for advanced airway management training?**
- A. Managing patients with complex respiratory failure**
  - B. Transporting patients with minor injuries**
  - C. Assessing patients with non-life-threatening conditions**
  - D. Conducting routine patient interviews**
- 10. What is the name of the passageway shared by the digestive tract and the respiratory systems for air and food?**
- A. Pharynx**
  - B. Oropharynx**
  - C. Larynx**
  - D. Nasal Cavity**



## **Answers**

SAMPLE

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

SAMPLE

## **Explanations**

SAMPLE

**1. What is the primary function of alveoli in the lungs?**

- A. Transport oxygen to the blood
- B. Facilitate gas exchange**
- C. Support lung structures
- D. Warm air entering the lungs

The primary function of alveoli in the lungs is to facilitate gas exchange. Alveoli are tiny air sacs located at the end of the respiratory bronchioles, where the crucial process of respiration occurs. They are surrounded by a network of capillaries, allowing for the exchange of oxygen and carbon dioxide between the air we breathe and the blood. When oxygen enters the alveoli during inhalation, it diffuses through the thin walls of the alveoli and into the capillaries, where it binds to hemoglobin in red blood cells for transport to tissues throughout the body. Simultaneously, carbon dioxide, which is a waste product of cellular metabolism, diffuses from the blood into the alveoli to be exhaled. This efficient gas exchange process is essential for maintaining the body's oxygen levels and removing carbon dioxide, thus playing a critical role in respiration and overall respiratory health. While transporting oxygen, supporting lung structures, and warming air are important aspects of the respiratory system, they do not capture the central role of alveoli, which is explicitly focused on the exchange of gases necessary for effective respiration.

**2. What is the most likely cause of sharp chest pain and cyanosis in an 18-year-old male after weight lifting?**

- A. Myocardial Infarction
- B. Spontaneous Pneumothorax**
- C. Pulmonary Embolism
- D. Pneumonia

The most likely cause of sharp chest pain and cyanosis in an 18-year-old male after weight lifting is a spontaneous pneumothorax. This condition can occur when air leaks into the space between the lung and the chest wall, often due to the rupture of a small bleb on the lung surface. Engaging in activities like weight lifting increases intra-thoracic pressure, which can contribute to the rupture of these blebs, leading to sudden sharp chest pain and potential respiratory distress. Cyanosis, which is a bluish discoloration of the skin due to inadequate oxygenation, aligns with the acute respiratory complications that can arise from a pneumothorax. As the air enters the pleural space, lung capacity is compromised, resulting in difficulty breathing and reduced oxygen exchange, which can manifest as cyanosis. In contrast, myocardial infarction and pulmonary embolism are less common causes of chest pain in a young, otherwise healthy individual. Pneumonia typically presents with different symptoms, such as a productive cough and fever, rather than sudden sharp pain and cyanosis. Therefore, spontaneous pneumothorax is the most fitting diagnosis given the context of recent vigorous physical activity and the specific symptoms described.

**3. A 56-year-old female is struggling to breathe with wheezing and is unable to hold her head up. What should you do?**

**A. Provide oxygen**

**B. Check airway for foreign body obstructions**

**C. Administer medication**

**D. Start CPR**

In the scenario described, where a 56-year-old female is struggling to breathe and exhibiting wheezing while being unable to hold her head up, checking the airway for foreign body obstructions is the most crucial initial step. This is because airway patency is fundamental to effective ventilation and oxygenation. In patients who are struggling to breathe, especially when there are audible wheezes, there is a possibility of an obstruction, either due to anatomical issues (like swelling) or foreign objects, which could exacerbate their respiratory distress. By checking the airway, you can quickly determine if there's an obstruction that needs to be addressed immediately. Providing oxygen, administering medication, or starting CPR would be appropriate responses depending on the specific situation, but they come after ensuring that the airway is clear. Without a clear airway, any further interventions like giving medication or supplemental oxygen may not be effective. Furthermore, starting CPR is indicated only in cases of cardiac arrest, which does not directly relate to the immediate concerns of this patient, who is still breathing albeit inadequately. Therefore, the priority must be to assess and secure the airway first.

**4. What position would typically help a patient experiencing severe respiratory distress?**

**A. Supine**

**B. Fowler's position**

**C. Prone**

**D. Lateral recumbent**

Fowler's position is particularly effective for patients experiencing severe respiratory distress because it allows for optimal lung expansion and facilitates easier breathing. By sitting upright or at a 45 to 90-degree angle, gravity helps the diaphragm function more effectively, reducing the work of breathing and promoting better oxygenation. This position also decreases pressure on the lungs from abdominal organs, allowing for more efficient airflow. In contrast, other positions may not provide the same benefits for someone in respiratory distress. Supine can restrict the lungs and make it more difficult for the patient to breathe deeply. Prone may be useful in some specific clinical scenarios but generally does not assist patients in acute respiratory difficulty as effectively as Fowler's position. The lateral recumbent position can help maintain an open airway but does not support optimal ventilation and lung expansion in the same way that Fowler's does. Therefore, Fowler's position is the preferred choice for enhancing respiratory function in acute distress situations.

**5. Why is it important to secure the airway with tape or a device?**

- A. To improve the patient's comfort during transport**
- B. To prevent dislodgment of the airway adjunct during transport**
- C. To facilitate easier access for medical personnel**
- D. To provide a clear pathway for intubation**

Securing the airway with tape or a device is essential primarily to prevent dislodgment of the airway adjunct during transport. When an airway adjunct, such as an oropharyngeal or nasopharyngeal airway, is properly secured, it ensures that it remains in place. Any movement, such as from patient transport, can dislodge an unsecured airway adjunct, potentially leading to airway obstruction. Maintaining a patent airway is crucial for effective ventilation and oxygenation. If the adjunct becomes dislodged, it could compromise the patient's airway, leading to respiratory distress or failure. Therefore, ensuring that the airway remains open and unobstructed by securing it appropriately is a fundamental aspect of patient care in emergency medical services. This action helps maintain the effectiveness of the airway management while minimizing the risk of complications during transport.

**6. Which oxygen delivery method is most effective for a patient with severe hypoxia?**

- A. Nasal cannula**
- B. Simple face mask**
- C. Nonrebreather mask**
- D. Venturi mask**

The nonrebreather mask is the most effective method for delivering oxygen to a patient with severe hypoxia because it allows for the highest concentration of oxygen to be supplied directly to the patient. This device utilizes a reservoir bag that stores oxygen, ensuring that the patient receives a high flow of oxygen—typically around 90-100% concentration—while preventing the rebreathing of exhaled carbon dioxide. In cases of severe hypoxia, it is crucial to provide maximum oxygen levels to quickly increase the blood oxygen saturation and improve the patient's condition. The design of the nonrebreather mask, which includes one-way valves that prevent air from entering the mask from the exhaled breath, ensures that the patient only inhales oxygen-rich air from the reservoir. Other methods of oxygen delivery, like the nasal cannula or simple face mask, do not deliver sufficient oxygen concentrations to address severe cases of hypoxia effectively. A Venturi mask can provide controlled oxygen concentrations, but it is less effective in emergencies requiring immediate high-flow oxygen. Therefore, the nonrebreather mask is the preferred choice in scenarios of significant hypoxia, allowing for rapid and effective treatment.

**7. Why do EMTs measure blood pressure and assess for perfusion during airway interventions?**

- A. To evaluate the overall hemodynamic status affecting oxygen delivery**
- B. To calculate the patient's BMI for assessment**
- C. To identify signs of infection in the patient**
- D. To determine the patient's blood type for transfusion**

EMTs measure blood pressure and assess for perfusion during airway interventions primarily to evaluate the overall hemodynamic status affecting oxygen delivery. This is vital because oxygen delivery to tissues is influenced not only by the adequacy of the airway and ventilation but also by the patient's cardiovascular status. Blood pressure provides insight into the patient's circulation; if blood pressure is low, it indicates that there may be inadequate perfusion to vital organs, which can lead to hypoxia and further complications if the airway isn't managed effectively. Assessing perfusion, often through checking skin signs, capillary refill, and mental status, helps EMTs understand if the patient is adequately oxygenated and if their body is responding well to the oxygen being delivered. In emergencies, the effectiveness of airway interventions can be significantly impacted by the patient's hemodynamics. Therefore, keeping track of blood pressure and perfusion allows EMTs to make informed decisions about the necessary airway interventions and any additional treatments required to stabilize the patient. Other choices, such as calculating BMI, identifying signs of infection, or determining blood type, do not directly relate to the immediate concern of airway management and its impact on oxygen delivery.

**8. What is the term for abnormal breath sounds resulting from an obstructed airway during inspiration?**

- A. Wheezing**
- B. Stridor**
- C. Ronchi**
- D. Rales**

The term for abnormal breath sounds resulting from an obstructed airway during inspiration is stridor. Stridor is a high-pitched, wheezing sound typically associated with partial obstruction of the upper airway, particularly affecting areas like the larynx or trachea. This sound arises when airflow is turbulent due to narrowing or blockage, which is often caused by conditions such as swelling from an allergic reaction, infection, or foreign body obstruction. In clinical practice, stridor is an important indicator of significant airway compromise and requires immediate attention. Recognizing stridor can help healthcare providers assess the severity of an airway obstruction and prioritize interventions. The other terms refer to different types of abnormal lung sounds. Wheezing is primarily associated with obstructive airway diseases like asthma, where airflow limitation leads to a musical, high-pitched sound during expiration. Ronchi are lower-pitched sounds caused by secretions in the larger airways, often noticeable during expiration but can also affect inspiration. Rales, also known as crackles, are fine, short sounds typically indicative of fluid in the alveoli and are more commonly heard in conditions like pneumonia or heart failure.

**9. Which is an indication for advanced airway management training?**

- A. Managing patients with complex respiratory failure**
- B. Transporting patients with minor injuries**
- C. Assessing patients with non-life-threatening conditions**
- D. Conducting routine patient interviews**

Advanced airway management training is crucial in scenarios where patients exhibit complex respiratory failure. This condition may involve various etiologies such as obstructive sleep apnea, chronic obstructive pulmonary disease (COPD) exacerbations, or any situation where a patient demonstrates an inadequate ability to maintain their airway independently, potentially leading to respiratory distress or failure. In instances of complex respiratory failure, basic airway maintenance techniques might not be sufficient, and advanced techniques such as endotracheal intubation or utilizing supraglottic devices may be required to secure the airway effectively. Training in advanced airway management equips healthcare providers with the skills and knowledge to respond appropriately to these high-risk scenarios, ensuring that they can provide adequate ventilation and oxygenation. Other situations like transporting patients with minor injuries, assessing patients with non-life-threatening conditions, or conducting routine patient interviews do not typically warrant advanced airway management skills since they generally involve stable patients who do not require immediate intervention to manage their airway. These situations call for standard assessment and management rather than advanced skills, highlighting the necessity of appropriate training only in those more critical contexts.

**10. What is the name of the passageway shared by the digestive tract and the respiratory systems for air and food?**

- A. Pharynx**
- B. Oropharynx**
- C. Larynx**
- D. Nasal Cavity**

The passageway that is shared by both the digestive tract and the respiratory systems for air and food is called the pharynx. The pharynx serves as a critical junction where air from the nasal cavity and food from the mouth converge before being directed to their respective pathways—air moving into the larynx and food into the esophagus. This anatomical structure is essential for the process of swallowing and breathing, highlighting its dual role in maintaining both airway integrity and digestive function. While the oropharynx, larynx, and nasal cavity are related structures, they each have specific functions and limitations. The oropharynx is specifically a part of the pharynx located behind the oral cavity, dealing primarily with the passage of air and food but not encompassing the whole shared passageway. The larynx, on the other hand, is primarily involved in protecting the airway and producing sound, acting as a passageway for air only. Lastly, the nasal cavity primarily serves as an airway passage for breathing, with no role in the digestive process. This distinction clarifies why pharynx is the correct answer, as it encompasses the entire shared functioning of both the respiratory and digestive systems.



## 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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://fisdapemtairway.examzify.com>**

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