

FISDAP EMT READINESS 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. In a traumatic emergency, asking "What happened?" can help determine what aspect of the patient's condition?**
 - A. Possible allergic reactions
 - B. Mechanism of injury
 - C. Pre-existing conditions
 - D. Medications taken
- 2. If you have delivered two shocks with the defibrillator and the patient now has a pulse but remains apneic, what is your next step?**
 - A. Perform chest compressions
 - B. Continue ventilations with oxygen and transport
 - C. Monitor the pulse and wait
 - D. Administer more shocks
- 3. A patient presents with a headache, right cheek sagging, and a limp left arm. What is your best course of action?**
 - A. Administer analgesics
 - B. Perform a prehospital stroke scale
 - C. Transport to a hospital
 - D. Conduct a preliminary assessment
- 4. An unresponsive near-drowning patient has a pulse but no respirations. What is the best way to manage the airway?**
 - A. Use a jaw thrust, oral airway, and bag-valve mask
 - B. Perform mouth-to-mouth resuscitation
 - C. Apply supplemental oxygen with a non-rebreather mask
 - D. Initiate chest compressions immediately
- 5. A man in a diner suddenly begins gasping, then becomes silent and cyanotic. What should you do?**
 - A. Conduct a blind finger sweep
 - B. Perform abdominal thrusts
 - C. Begin CPR immediately
 - D. Administer oxygen

- 6. A 24 year old female with large blisters on her forearm from drain cleaner exposure is experiencing which type of burn?**
- A. First degree burn
 - B. Partial thickness burn
 - C. Full thickness burn
 - D. Chemical burn
- 7. A 17-year-old female experiences dizziness and numbness after a breakup. What is a key step in her management?**
- A. Transport her without monitoring
 - B. Monitor her oxygen saturation and transport
 - C. Encourage her to breathe into a paper bag
 - D. Provide emotional support only
- 8. What should be done for a patient who has been exposed to a diluted bleach solution?**
- A. Apply a bandage to the affected areas
 - B. Instruct the patient to remove his clothing
 - C. Provide supportive care and monitor vitals
 - D. Perform decontamination with water
- 9. Which patient, among those complaining of shortness of breath, is most likely hypoxic?**
- A. A 12-year-old female exposed to cold temperatures; SpO2 of 88%
 - B. A 30-year-old male with asthma; SpO2 of 95%
 - C. A 45-year-old female with pneumonia; SpO2 of 92%
 - D. A 60-year-old male with chronic lung disease; SpO2 of 90%
- 10. How should you preserve potential crime scene evidence when removing clothing from a patient?**
- A. Place items in a plastic bag
 - B. Place items in a large paper bag
 - C. Fold items neatly and store in a box
 - D. Leave items in situ at the scene

Answers

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

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Explanations

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1. In a traumatic emergency, asking "What happened?" can help determine what aspect of the patient's condition?

- A. Possible allergic reactions
- B. Mechanism of injury**
- C. Pre-existing conditions
- D. Medications taken

Asking "What happened?" in a traumatic emergency is crucial for understanding the mechanism of injury. This is because the details surrounding the event can reveal how the injury occurred, which directly influences the types of injuries sustained and the potential complications that may arise. Mechanism of injury encompasses factors such as the force involved, the direction of impact, and the nature of the incident (e.g., fall, collision, or blunt force). Understanding the mechanism helps emergency responders assess the severity of the injuries and establish a treatment plan. For instance, knowing whether a patient was struck by a vehicle or fell from a significant height can guide the clinician in anticipating specific injuries such as fractures, internal bleeding, or spinal injuries. This initial information is essential for prioritizing interventions and ensuring the patient receives appropriate care in a timely manner.

2. If you have delivered two shocks with the defibrillator and the patient now has a pulse but remains apneic, what is your next step?

- A. Perform chest compressions
- B. Continue ventilations with oxygen and transport**
- C. Monitor the pulse and wait
- D. Administer more shocks

When a patient has regained a pulse but remains apneic following defibrillation, the immediate priority is to provide adequate oxygenation and ventilation support. Since the patient is not breathing on their own, it is crucial to continue ventilations, ideally with supplemental oxygen to ensure proper oxygenation of the blood. Transporting the patient while maintaining effective ventilations is vital to prevent hypoxia and further deterioration of the patient's condition. This action ensures that even though the heart is functioning, the patient's overall status is stabilized by addressing the lack of breathing. Continuing with chest compressions would not be appropriate, as the patient has a pulse, and further shocks are not indicated at this stage since the rhythm has converted. Monitoring the pulse without active ventilation would not adequately address the patient's needs either. Thus, providing oxygen and maintaining ventilations while prepping for transport is the most appropriate course of action in this scenario.

3. A patient presents with a headache, right cheek sagging, and a limp left arm. What is your best course of action?

- A. Administer analgesics
- B. Perform a prehospital stroke scale**
- C. Transport to a hospital
- D. Conduct a preliminary assessment

The best course of action is to perform a prehospital stroke scale. This approach is essential in determining whether the patient is experiencing a stroke, which aligns with the symptoms presented, such as a headache, facial drooping, and weakness in the arm. Conducting a stroke scale will allow for a quick assessment of the patient's neurological status by evaluating specific criteria related to speech, arm strength, and facial symmetry. Identifying a stroke quickly is crucial as it can significantly impact treatment options and outcomes. If a stroke is suspected, time is of the essence, and the information gathered from the stroke scale can inform subsequent interventions and the urgency of transport to a hospital equipped for stroke care. This assessment helps in making timely decisions and ensuring the appropriate resources are mobilized to treat the patient effectively.

4. An unresponsive near-drowning patient has a pulse but no respirations. What is the best way to manage the airway?

- A. Use a jaw thrust, oral airway, and bag-valve mask**
- B. Perform mouth-to-mouth resuscitation
- C. Apply supplemental oxygen with a non-rebreather mask
- D. Initiate chest compressions immediately

In the scenario presented, the best way to manage the airway of an unresponsive near-drowning patient who has a pulse but no respirations is to use a jaw-thrust maneuver, insert an oral airway, and employ a bag-valve mask. The jaw-thrust maneuver is particularly effective in patients who are unresponsive, as it helps to open the airway by moving the jaw forward while minimizing the risk of further airway obstruction from the tongue. An oral airway can then be used to further secure the airway, ensuring that it remains open and unobstructed. Lastly, using a bag-valve mask allows for positive pressure ventilation, delivering oxygen directly to the patient's lungs, which is critical since the patient is not breathing. This approach is essential in any case of respiratory arrest, especially in near-drowning situations, as the priority is to restore adequate ventilation. Immediate ventilation supports can prevent brain hypoxia and improve the chances of survival. Other methods, such as mouth-to-mouth resuscitation, may not be as effective in emergency situations due to potential barriers, including the unresponsiveness and potential risk of further complications. Supplemental oxygen alone, while beneficial, does not address the need for ventilatory support, which is critical here. Initiating chest

5. A man in a diner suddenly begins gasping, then becomes silent and cyanotic. What should you do?

- A. Conduct a blind finger sweep
- B. Perform abdominal thrusts**
- C. Begin CPR immediately
- D. Administer oxygen

The situation described depicts a person who is experiencing a severe airway obstruction, indicated by gasping and becoming silent and cyanotic. In cases of suspected choking where someone cannot speak and shows signs of respiratory distress, performing abdominal thrusts (also known as the Heimlich maneuver) is the appropriate response. This technique can help to create enough pressure in the abdomen to expel the object blocking the airway, thus restoring normal breathing. Administering oxygen could be beneficial in other situations, but it wouldn't address the immediate airway obstruction. Beginning CPR is also not the first step here, as CPR is indicated only when the person is unresponsive and not breathing following unsuccessful attempts to clear the airway. Conducting a blind finger sweep is not advised in this scenario because it could push the obstruction further into the airway instead of removing it. Therefore, performing abdominal thrusts is the most effective and urgent way to attempt to resolve the blockage in this critical situation.

6. A 24 year old female with large blisters on her forearm from drain cleaner exposure is experiencing which type of burn?

- A. First degree burn
- B. Partial thickness burn**
- C. Full thickness burn
- D. Chemical burn

The situation described involves a 24 year old female with large blisters on her forearm as a result of exposure to drain cleaner, which is a caustic chemical. When evaluating the type of burn based on the presentation, the presence of large blisters indicates that the burn has penetrated through the outermost layer of the skin (epidermis) and into the second layer (dermis), which is characteristic of a partial thickness burn. Partial thickness burns involve damage to both the epidermis and the dermis, leading to symptoms such as pain, swelling, and blistering. The blisters are a body's response to protect the underlying tissues and signify that the injury is more significant than a first degree burn, which affects only the epidermis and typically presents with redness and minor swelling without blistering. Although a chemical burn is also involved here because the causative agent is a chemical substance, the classification of burns is based primarily on the depth and appearance of the skin damage. Therefore, the primary classification concerning the degree of skin injury in this case is a partial thickness burn due to the presence of large blisters.

7. A 17-year-old female experiences dizziness and numbness after a breakup. What is a key step in her management?

- A. Transport her without monitoring
- B. Monitor her oxygen saturation and transport**
- C. Encourage her to breathe into a paper bag
- D. Provide emotional support only

Monitoring her oxygen saturation and transporting her is essential in this scenario because dizziness and numbness can be signs of various underlying issues, potentially including anxiety, panic attacks, or even more serious conditions like hypoxia or neurological problems. By assessing her oxygen saturation, you can determine if her symptoms are related to a lack of oxygen, which would require immediate intervention. Additionally, transporting her after proper monitoring ensures that she receives appropriate medical evaluation and care for her symptoms, especially since they have arisen after a significant emotional event, which can sometimes lead to physiological symptoms mimicking more severe conditions. This approach prioritizes her safety and health by ensuring that any potential medical issues are identified and treated. Other options, such as providing emotional support alone or suggesting breathing into a paper bag, lack a thorough assessment and could overlook critical medical concerns that require attention. Transporting without monitoring could also risk missing vital signs that would guide effective treatment.

8. What should be done for a patient who has been exposed to a diluted bleach solution?

- A. Apply a bandage to the affected areas
- B. Instruct the patient to remove his clothing**
- C. Provide supportive care and monitor vitals
- D. Perform decontamination with water

For a patient who has been exposed to a diluted bleach solution, the most appropriate action is to instruct the patient to remove his clothing. This is essential because bleach, even in its diluted form, can cause skin irritation or chemical burns if left in contact with the skin. Removing contaminated clothing can help prevent further skin exposure and irritation, which is crucial for the patient's safety and comfort. Following clothing removal, other measures, such as rinsing the affected skin with water, should be taken to facilitate decontamination. Supportive care and monitoring of vital signs are important in case the patient develops any complications, but the immediate priority is to eliminate the source of exposure to minimize harm.

9. Which patient, among those complaining of shortness of breath, is most likely hypoxic?

- A. A 12-year-old female exposed to cold temperatures; SpO2 of 88%
- B. A 30-year-old male with asthma; SpO2 of 95%
- C. A 45-year-old female with pneumonia; SpO2 of 92%
- D. A 60-year-old male with chronic lung disease; SpO2 of 90%

The patient most likely to be hypoxic is the 12-year-old female exposed to cold temperatures with an SpO2 of 88%. Hypoxia, or a deficiency in the amount of oxygen reaching the tissues, can be assessed in part through pulse oximetry, which measures arterial oxygen saturation (SpO2). In this scenario, an SpO2 level of 88% indicates that the patient's blood is not saturated with oxygen at a normal level, which typically should be above 95%. Cold exposure can lead to various physiological effects that may impair breathing and oxygen exchange, contributing to hypoxia. In contrast, the other patients have SpO2 levels that are generally indicative of adequate oxygenation—95% and above reflect a more sufficient oxygen saturation. The patient with pneumonia still has an SpO2 of 92%, which suggests mild hypoxia; however, it is not as critical as the situation with the child who is much lower at 88%. The 60-year-old male has chronic lung disease, which can affect oxygen saturation; nevertheless, his SpO2 of 90% is still above the threshold seen in the younger patient. Thus, the combination of low SpO2 and the circumstantial exposure puts the

10. How should you preserve potential crime scene evidence when removing clothing from a patient?

- A. Place items in a plastic bag
- B. Place items in a large paper bag
- C. Fold items neatly and store in a box
- D. Leave items in situ at the scene

When removing clothing from a patient at a potential crime scene, it is crucial to preserve evidence properly to maintain its integrity and avoid contamination. Placing items in a large paper bag is the best option as it is breathable, which helps prevent the growth of mold or mildew that can occur in plastic bags due to moisture trapped inside. Paper bags allow any moisture to escape, minimizing the risk of damaging the evidence. Additionally, using a paper bag allows the evidence to be documented properly for later analysis, adhering to protocols that ensure the chain of custody is maintained. This is essential for any potential investigations or legal proceedings, as the preservation of evidence can significantly affect the outcome of a case. Preserving items in plastic bags can lead to moisture buildup, while folding items neatly and storing them in a box may compromise the integrity of the evidence as it may cause damage or contamination. Leaving items in situ at the scene could be acceptable in certain circumstances, but it may not be feasible if the patient needs urgent medical care or if the situation poses a safety risk. Therefore, using a large paper bag is the most effective method for preserving potential crime scene evidence when dealing with a patient's clothing.

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:

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

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