

GREATER MIAMI VALLEY EMS COUNCIL (GMVEMSC) PROTOCOL PRACTICE EXAM (SAMPLE) STUDY GUIDE



Prepare with structure. Pass with confidence



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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. For a pediatric patient weighing less than 20 kg, what is the correct dose of Naloxone?**
 - A. 0.2 mg/kg IN
 - B. 0.1 mg/kg IN (max 2mg)
 - C. 1 mg total
 - D. 2 mg total

- 2. How deep should compressions be for infants during CPR?**
 - A. 1 inch
 - B. 1.5 inches
 - C. 2 inches
 - D. 1/3 depth of chest (about 1.5 inches)

- 3. In which scenario should a non-rebreather mask (NRM) be utilized?**
 - A. For mild allergic reactions
 - B. For severe trauma patients or those in respiratory distress
 - C. For patients with stable vitals
 - D. For patients requiring long-term oxygen therapy

- 4. For a patient with asthma experiencing wheezing, what should you assist them with?**
 - A. Oxygen administration
 - B. Metered dose inhaler
 - C. IV fluids
 - D. Adrenaline injection

- 5. What do items enclosed in braces ({}) signify?**
 - A. Mandatory procedures for all departments
 - B. Optional actions determined by the department and Medical Director
 - C. Standard practices that must be adhered to
 - D. Guidelines that require immediate enforcement

- 6. Where should a pregnant patient in labor be taken for care?**
- A. Any emergency room
 - B. Children's Hospital
 - C. Miami Valley Hospital
 - D. Only local clinics
- 7. When is secondary triage performed in the SALT system?**
- A. Only for patients in critical condition
 - B. Prior to transport for all victims
 - C. Only after a primary assessment
 - D. No secondary triage is needed
- 8. Which medication administration right ensures the correct name is on the label?**
- A. Right Dose
 - B. Right Medication
 - C. Right Patient
 - D. Right Time
- 9. What key information should you obtain from a woman in childbirth?**
- A. Only the contraction duration
 - B. Disease history and medications
 - C. History of patient condition and pregnancy details
 - D. Only the due date
- 10. What should be done in case of a prolapsed umbilical cord?**
- A. Keep the baby warm
 - B. Apply pressure to the mother's abdomen
 - C. Place the mother in a knee-chest position
 - D. Transport immediately without assistance

Answers

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

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Explanations

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1. For a pediatric patient weighing less than 20 kg, what is the correct dose of Naloxone?

- A. 0.2 mg/kg IN
- B. 0.1 mg/kg IN (max 2mg)**
- C. 1 mg total
- D. 2 mg total

The correct dosage of Naloxone for a pediatric patient weighing less than 20 kg is 0.1 mg/kg administered intranasally, with a maximum limit of 2 mg. This dosing guideline is essential to ensure both effective treatment of opioid overdose and safety for young patients. This dosing allows for a calculation that can be easily adjusted based on the child's weight, ensuring that the medication is appropriately titrated to their specific physiological needs. Setting a maximum dose of 2 mg prevents administering excessive medication in cases where the child is on the higher end of the weight range. By following this protocol, responders can confidently administer Naloxone without exceeding a safe threshold, thus optimizing outcomes for pediatric patients experiencing opioid-related emergencies.

2. How deep should compressions be for infants during CPR?

- A. 1 inch
- B. 1.5 inches
- C. 2 inches
- D. 1/3 depth of chest (about 1.5 inches)**

The recommended depth for compressions when performing CPR on infants is approximately one-third the depth of their chest, which is about 1.5 inches. This guideline ensures that the compressions are effective enough to generate sufficient blood flow during cardiac arrest while avoiding potential injury. Infants have a more fragile chest structure compared to older children and adults, and the compression depth is specifically tailored to their anatomical considerations. By aiming for one-third of the chest depth, rescuers can provide adequate compressions that improve the likelihood of restoring circulation without risking harm to the infant's ribcage or internal organs. Using this standard helps to maintain uniformity in CPR training across different age groups, emphasizing the importance of adapting techniques to suit the size and physiology of the patient.

3. In which scenario should a non-rebreather mask (NRM) be utilized?

- A. For mild allergic reactions
- B. For severe trauma patients or those in respiratory distress**
- C. For patients with stable vitals
- D. For patients requiring long-term oxygen therapy

A non-rebreather mask (NRM) is specifically designed to deliver a high concentration of oxygen to patients who are experiencing significant respiratory distress, such as those suffering from severe trauma or acute respiratory failure. This device allows for efficient oxygenation, providing close to 100% oxygen flow which is crucial in emergencies where patients cannot adequately oxygenate on their own. The construction of the NRM includes a reservoir bag that collects oxygen, and one-way valves prevent the patient from re-breathing exhaled carbon dioxide. In the case of severe trauma or pronounced respiratory distress, where the oxygen demand exceeds the supply, the NRM allows first responders to temporarily alleviate hypoxemia, thereby improving the patient's condition as they await further medical interventions. The other scenarios provided are less suitable for NRM use; for example, mild allergic reactions do not typically require such high levels of oxygen, nor do stable patients who are already maintaining their oxygen levels effectively. Moreover, long-term oxygen therapy generally requires different forms of delivery systems, such as nasal cannulas or other devices specifically designed for chronic care.

4. For a patient with asthma experiencing wheezing, what should you assist them with?

- A. Oxygen administration
- B. Metered dose inhaler**
- C. IV fluids
- D. Adrenaline injection

Assisting a patient with asthma who is experiencing wheezing primarily involves helping them use a metered dose inhaler (MDI) with a spacer, if available. The MDI delivers a bronchodilator medication, typically albuterol, directly to the lungs, which can help relieve bronchospasm and reduce wheezing. The action of the medication works quickly to open the airways, making it a crucial intervention in managing an asthma exacerbation. Using the metered dose inhaler properly improves medication delivery to the patient's lungs, aiding in symptom relief. It is essential to ensure that the patient is using the inhaler correctly and to provide reassurance during administration, as panic can exacerbate asthma symptoms. Oxygen administration may also be indicated for patients with significant respiratory distress or low oxygen saturation, but in a typical context of managing wheezing with the goal of immediate symptom relief, assisting with the inhaler is the most direct action. Other options like IV fluids or an adrenaline injection are not standard for initial management of an asthma attack unless there are additional complications or signs of severe anaphylaxis.

5. What do items enclosed in braces ({ }) signify?

- A. Mandatory procedures for all departments
- B. Optional actions determined by the department and Medical Director**
- C. Standard practices that must be adhered to
- D. Guidelines that require immediate enforcement

Items enclosed in braces ({ }) signify optional actions that can be determined by the department and the Medical Director. This format allows for flexibility in practice, meaning that while certain actions are recommended or available, they are not mandated. Departments may choose to adopt these optional practices based on their specific protocols or the preferences of their Medical Director, thereby tailoring the EMS response to the unique needs of their operation and the community they serve. This distinction is important for understanding how protocols may vary by department while still adhering to overarching standards set by the GMVEMSC.

6. Where should a pregnant patient in labor be taken for care?

- A. Any emergency room
- B. Children's Hospital
- C. Miami Valley Hospital**
- D. Only local clinics

A pregnant patient in labor should be taken to a facility that is equipped to handle obstetric emergencies and provide appropriate maternity care. Choosing Miami Valley Hospital is the most suitable option as it is likely to be a full-service hospital with the necessary resources, including obstetricians, labor and delivery rooms, and neonatal units, essential for the care of both the mother and the newborn. Emergency rooms in general do provide care for laboring patients, but not all emergency rooms are equipped with specialized obstetric services. Some may lack the necessary facilities or staff specifically trained in labor and delivery. Therefore, while taking a pregnant patient to any emergency room is not ideal, Miami Valley Hospital is specifically known for its maternal healthcare capabilities. Children's Hospital, while likely providing excellent pediatric care, does not specialize in labor and delivery for pregnant women. Therefore, it is not appropriate as the primary destination for a laboring patient. Local clinics typically do not provide the comprehensive care needed for a laboring mother, as they often lack the necessary medical personnel or infrastructure to respond to complications that can arise during labor. Thus, they are also not suitable for this scenario. Overall, the choice of Miami Valley Hospital ensures that the patient receives the specialized care required during labor and delivery, which

7. When is secondary triage performed in the SALT system?

- A. Only for patients in critical condition
- B. Prior to transport for all victims**
- C. Only after a primary assessment
- D. No secondary triage is needed

In the SALT triage system, secondary triage is performed prior to transport for all victims. This is crucial because secondary triage allows responders to reassess patients after the initial primary assessment, ensuring that the most critically injured individuals receive the necessary attention and resources. During this process, rescuers consider factors such as changes in a patient's condition, their response to interventions, and the overall capacity of the EMS system to transport or manage patients effectively. Conducting a secondary triage before transport is essential to prioritize care not only based on initial presentations but also on updates in the patient's status, which can significantly affect outcomes. In emergencies, rapid and accurate decision-making is pivotal, so providing a systematic approach to evaluate each victim again serves to optimize the allocation of medical resources and personnel.

8. Which medication administration right ensures the correct name is on the label?

- A. Right Dose
- B. Right Medication**
- C. Right Patient
- D. Right Time

The correct focus is on "Right Medication," which ensures that the medication being administered is the correct one as indicated on the label. This right emphasizes the importance of verifying that the medication matches the prescription or treatment plan before administration. Proper identification of the medication is crucial for patient safety because administering the wrong drug can lead to ineffective treatment or potentially harmful interactions. Ensuring the right medication involves checking the label against the order, including the name, appearance, and concentration of the drug. This is a critical step in preventing medication errors, as many drugs may sound alike or look similar, heightening the risk of administering an incorrect medication. While the other rights—such as ensuring the right dose, patient, and time—are essential for safe medication administration, the specific focus on verifying the correct medication name addresses the foundational aspect of identifying the drug itself, which is pivotal in all healthcare practices.

9. What key information should you obtain from a woman in childbirth?

- A. Only the contraction duration
- B. Disease history and medications
- C. History of patient condition and pregnancy details**
- D. Only the due date

The most critical information to gather from a woman in childbirth includes her history of the patient condition and relevant pregnancy details. Understanding these aspects is essential for several reasons. First, details about the ongoing labor, such as the frequency and duration of contractions, provide insight into the stage of labor and whether immediate interventions are necessary. Additionally, knowing if this is a first-time pregnancy or subsequent one influences management and care protocols. Second, an assessment of any complications during pregnancy, such as gestational diabetes, preeclampsia, or other medical conditions, is vital for ensuring both the mother's and baby's safety during delivery. Information about prenatal care and any medical interventions that occurred throughout the pregnancy can guide emergency care and assist in making informed decisions during the childbirth process. In summary, obtaining a comprehensive medical history and specific pregnancy details is key to providing the best possible care during childbirth. It informs the assessment of risks and the need for any advanced medical support.

10. What should be done in case of a prolapsed umbilical cord?

- A. Keep the baby warm
- B. Apply pressure to the mother's abdomen
- C. Place the mother in a knee-chest position**
- D. Transport immediately without assistance

In the case of a prolapsed umbilical cord, placing the mother in a knee-chest position is the most effective action to take. This position helps to relieve pressure on the umbilical cord, which can become compressed during delivery if it is trapped between the fetal head and the birth canal. By having the mother adopt this position, gravity assists in minimizing cord compression, thereby improving blood flow and oxygen delivery to the baby. Maintaining proper fetal oxygenation is paramount, and the knee-chest position can also encourage the fetal head to move away from the cord. This is crucial in preventing potential complications such as fetal distress or hypoxia. Other actions, while important in general emergencies, do not specifically address the immediate risks associated with a prolapsed umbilical cord. For example, keeping the baby warm is vital after delivery but does not mitigate the situation at this stage. Applying pressure to the mother's abdomen could risk further cord compression. Immediate transport without assistance may overlook the need for stabilization and management of the umbilical cord issue before moving the mother. Thus, the knee-chest position remains the best option for addressing a prolapsed cord effectively.

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://gmveemscprotocol.examzify.com>

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

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