

IAED Emergency Medical Dispatcher (EMD) Practice Exam (Sample)

Study Guide



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SAMPLE

Questions

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- 1. What does the term 'abandonment' refer to in emergency medical situations?**
 - A. Ignoring a patient in need while on duty**
 - B. Leaving a patient after care initiation without proper transfer**
 - C. Unable to provide care due to lack of supplies**
 - D. Performing procedures outside the scope of practice**
- 2. What is the first piece of information an Emergency Medical Dispatcher should obtain during the initial assessment?**
 - A. Callback number**
 - B. Address of the emergency**
 - C. Chief complaint**
 - D. Identification of the patient**
- 3. What function does sweat serve in the body?**
 - A. Helps in digestion**
 - B. Contributes to respiratory function**
 - C. Expels waste and regulates temperature**
 - D. Facilitates blood circulation**
- 4. Which of the following refers to permission to treat a patient?**
 - A. Authorization**
 - B. Consent**
 - C. Agreement**
 - D. Approval**
- 5. What is plasma primarily composed of?**
 - A. Red blood cells**
 - B. Platelets and white blood cells**
 - C. Fluids and nutrients**
 - D. Water and proteins**

- 6. Which organ is responsible for breaking down starches, fats, and proteins?**
- A. Liver**
 - B. Stomach**
 - C. Pancreas**
 - D. Small intestine**
- 7. What type of responses are based on the mechanism of injury?**
- A. Medical emergencies**
 - B. Traumatic incidents**
 - C. Psychiatric emergencies**
 - D. Non-urgent situations**
- 8. What structures make up the urinary system?**
- A. Kidneys, ureters, urinary bladder, and urethra**
 - B. Heart, arteries, veins, and capillaries**
 - C. Liver, gallbladder, and pancreas**
 - D. Muscles, tendons, and ligaments**
- 9. How many subsystems make up the nervous system?**
- A. One**
 - B. Two**
 - C. Three**
 - D. Four**
- 10. What does the term "predetermined response configurations" refer to?**
- A. The mode of transportation used by the patients**
 - B. The advanced determination of unit type and response mode**
 - C. The locations of all ambulances in the area**
 - D. The exact timing of emergency responses**

Answers

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

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Explanations

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1. What does the term 'abandonment' refer to in emergency medical situations?

- A. Ignoring a patient in need while on duty**
- B. Leaving a patient after care initiation without proper transfer**
- C. Unable to provide care due to lack of supplies**
- D. Performing procedures outside the scope of practice**

The term 'abandonment' in emergency medical situations specifically refers to the act of leaving a patient after care has been initiated without ensuring that there is a proper transfer of care to another qualified individual. This is a crucial concept in emergency medical services because once a caregiver starts providing assistance to a patient, they have a legal and ethical obligation to continue that care until the patient can be safely handed over to another healthcare provider or until the situation dictates that care can be safely discontinued. This responsibility underscores the importance of continuity of care in emergency situations, where abrupt discontinuation can lead to adverse outcomes for the patient. Properly transferring care might involve providing a detailed report to incoming healthcare personnel or ensuring that the patient's needs are met before leaving the scene. In contrast, the other options do not accurately reflect the standard definition of abandonment in this context. Ignoring a patient while on duty does not align with the definition, nor does an inability to provide care due to a lack of supplies. Performing procedures outside of one's scope may constitute a breach of protocols but does not fit the definition of abandonment. Therefore, the correct understanding of abandonment is rooted in the obligation to continue care until it can be professionally transferred to another.

2. What is the first piece of information an Emergency Medical Dispatcher should obtain during the initial assessment?

- A. Callback number**
- B. Address of the emergency**
- C. Chief complaint**
- D. Identification of the patient**

The first piece of information an Emergency Medical Dispatcher should obtain during the initial assessment is the address of the emergency. This is crucial because knowing the location allows emergency services to be dispatched promptly to the scene. Time is of the essence in emergency situations, and without a clear address, it would significantly delay the response team, potentially putting the patient's life at risk. Prioritizing the address ensures that emergency personnel can navigate to the location swiftly, leading to faster care. Once the dispatcher has confirmed the address, they can then proceed to gather additional information, such as the chief complaint, callback number, and patient identification. However, the immediate priority must always be to secure the location where help is needed.

3. What function does sweat serve in the body?

- A. Helps in digestion
- B. Contributes to respiratory function
- C. Expels waste and regulates temperature**
- D. Facilitates blood circulation

Sweat serves a critical role in the body's regulatory functions, particularly in temperature management and waste elimination. When the body's internal temperature rises, whether due to physical activity, hot environments, or fever, sweat glands produce perspiration. As sweat evaporates from the skin surface, it effectively cools the body down, maintaining a stable internal temperature which is essential for optimal physiological function. In addition to thermoregulation, sweating also aids in the excretion of certain waste products, such as urea, salts, and various toxins. While the primary organs for waste removal are the kidneys and liver, sweating can assist in this process and contribute to overall homeostasis. The other functions listed do not accurately reflect the primary roles of sweating; digestion, respiratory function, and blood circulation involve different physiological mechanisms that do not directly include the process of sweating.

4. Which of the following refers to permission to treat a patient?

- A. Authorization
- B. Consent**
- C. Agreement
- D. Approval

The term that refers to permission to treat a patient is "consent." In the context of emergency medical dispatch and healthcare, consent is a fundamental principle that ensures patients are actively involved in decisions about their medical treatment. It indicates that the patient has been informed about the nature of their condition and the proposed interventions and has voluntarily agreed to receive care. Consent can be expressed verbally or in writing and may vary depending on the patient's competence or the urgency of the medical situation. In emergency situations where a patient is incapable of providing consent (due to unconsciousness or severe mental distress), implied consent may be assumed, allowing medical personnel to act in the patient's best interest. Other terms, while related to the broader concept of granting authority, do not specifically define the permission aspect in the medical context as accurately as "consent" does. "Authorization," "agreement," and "approval" apply in different scenarios and do not capture the essential legal and ethical nuances involved in obtaining permission to treat patients in the healthcare setting.

5. What is plasma primarily composed of?

- A. Red blood cells**
- B. Platelets and white blood cells**
- C. Fluids and nutrients**
- D. Water and proteins**

Plasma is primarily composed of water and proteins, making this the correct answer. Water constitutes about 90-92% of plasma volume, serving as the primary solvent for carrying various substances throughout the body. The proteins present in plasma, such as albumin, globulins, and fibrinogen, play crucial roles in maintaining osmotic pressure, transporting hormones and nutrients, and facilitating blood clotting. This composition is essential for various physiological functions, including transporting nutrients, waste products, and maintaining blood volume and pressure. The other choices reflect components that are indeed part of blood but do not accurately describe plasma's primary composition. For example, red blood cells, platelets, and white blood cells are cellular components of blood that are suspended within the plasma but are not part of its primary makeup. Fluids and nutrients are aspects of what plasma carries, not its primary constituents.

6. Which organ is responsible for breaking down starches, fats, and proteins?

- A. Liver**
- B. Stomach**
- C. Pancreas**
- D. Small intestine**

The pancreas plays a crucial role in the digestive process by secreting enzymes that break down starches, fats, and proteins. It produces a variety of digestive enzymes, including amylase for carbohydrates (starches), lipase for fats, and proteases for proteins. These enzymes are released into the small intestine, where they operate in the alkaline environment created by bicarbonate, which the pancreas also secretes. This coordinated effort allows for the efficient digestion of macronutrients, enabling the body to absorb and utilize them effectively. In contrast, while the stomach is involved in the digestion of proteins and has a role in the overall digestive process, it primarily breaks down food through mechanical and acidic means rather than by using enzymes. The liver's main function involves the production of bile to aid in fat digestion and the metabolism of nutrients but does not directly break down starches, fats, or proteins. Lastly, the small intestine is the site of nutrient absorption and finishes the digestion process, but it does not produce the digestive enzymes itself; that task is primarily performed by the pancreas.

7. What type of responses are based on the mechanism of injury?

- A. Medical emergencies**
- B. Traumatic incidents**
- C. Psychiatric emergencies**
- D. Non-urgent situations**

Responses based on the mechanism of injury typically involve traumatic incidents. This approach focuses on understanding how an injury occurred, which is essential in assessing the patient's condition and determining the appropriate emergency response. In cases of trauma, such as car accidents, falls, or gunshot wounds, the specifics of how the injury happened—like the type of impact, the force involved, and the area of the body affected—can provide critical insights into the likely injuries sustained. This information is vital for dispatchers and responders to prioritize care and prepare for potential complications. While medical emergencies, psychiatric emergencies, and non-urgent situations do require specific responses, they are not fundamentally based on the mechanism of injury. Medical emergencies might focus more on symptoms and underlying health conditions rather than the cause. Psychiatric emergencies center on mental health issues, and non-urgent situations typically do not necessitate immediate medical assessments based on injury mechanisms. Therefore, recognizing trauma and understanding the associated mechanisms are crucial for responsive, effective emergency medical care.

8. What structures make up the urinary system?

- A. Kidneys, ureters, urinary bladder, and urethra**
- B. Heart, arteries, veins, and capillaries**
- C. Liver, gallbladder, and pancreas**
- D. Muscles, tendons, and ligaments**

The urinary system is primarily made up of four key structures: the kidneys, ureters, urinary bladder, and urethra. The kidneys are responsible for filtering blood to create urine by removing waste and excess substances. Ureters are the tubes that transport urine from the kidneys to the urinary bladder, where urine is stored until it is excreted from the body. Finally, the urethra is the duct through which urine is expelled from the bladder during urination. The other options listed pertain to different body systems; for instance, the heart, arteries, veins, and capillaries are components of the circulatory system, while the liver, gallbladder, and pancreas are parts of the digestive system, and muscles, tendons, and ligaments relate to the musculoskeletal system. Thus, the correct answer accurately identifies the components that make up the urinary system, which plays a vital role in maintaining the body's fluid balance and eliminating waste.

9. How many subsystems make up the nervous system?

- A. One
- B. Two
- C. Three**
- D. Four

The nervous system is composed of three main subsystems: the central nervous system (CNS), the peripheral nervous system (PNS), and the autonomic nervous system (ANS). The central nervous system includes the brain and spinal cord, which are responsible for processing information and coordinating actions. The peripheral nervous system encompasses all the nerves that branch out from the CNS and connect to the rest of the body, facilitating communication between the CNS and limbs or organs. The autonomic nervous system, which is often considered a subdivision of the PNS, controls involuntary bodily functions such as heart rate and digestion, and it further divides into the sympathetic and parasympathetic systems. This classification into three subsystems is foundational in understanding how the nervous system operates as a complex network that coordinates all bodily functions and responses. Understanding this structure is essential for anyone in the medical field, including emergency medical dispatchers, as it provides insight into how the body reacts in various emergency situations.

10. What does the term "predetermined response configurations" refer to?

- A. The mode of transportation used by the patients
- B. The advanced determination of unit type and response mode**
- C. The locations of all ambulances in the area
- D. The exact timing of emergency responses

The term "predetermined response configurations" specifically pertains to the advanced determination of unit type and response mode. This concept involves establishing a plan ahead of time that details which emergency units will respond to various situations based on the nature of the incident. This ensures a structured and effective response by dispatching the appropriate resources—such as advanced life support units or basic life support units—before the emergency services arrive on scene. Such configurations are critical in emergency medical services because they help streamline the response process, allowing dispatchers to quickly mobilize the right personnel and equipment required for each specific type of emergency. By having these configurations in place, the response can be more efficient and tailored to the needs of the situation, potentially improving patient outcomes. Other options might touch on aspects related to emergency response but do not fully encapsulate the essence of predetermined response configurations. For instance, knowing the mode of transportation used by patients provides context but is not about the planning aspect. Similarly, the locations of ambulances offer situational awareness but don't address the proactive planning that predetermined configurations involve. Lastly, exact timing is more about response metrics rather than a configuration in advance of an incident.