

JIBC Primary Care Paramedic (PCP) Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Table of Contents

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

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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. What is automaticity in relation to cardiac cells?**
 - A. A cell's ability to relax**
 - B. A cell's ability to contract**
 - C. A cell's ability to generate its own electrical impulse**
 - D. A cell's ability to respond to stimuli**

- 2. What is the TBSA percentage for an adult arm?**
 - A. 6%**
 - B. 9%**
 - C. 12%**
 - D. 18%**

- 3. What does the equation stroke volume (SV) x heart rate (HR) calculate?**
 - A. Blood volume**
 - B. Cardiac output**
 - C. Blood pressure**
 - D. Stroke index**

- 4. What does "dromotropy" indicate about the heart?**
 - A. The strength of heart contractions**
 - B. The speed of the heart's electrical impulses**
 - C. The heart's rate**
 - D. The efficiency of blood pumping**

- 5. What is the most appropriate age range for a child in pediatric CPR guidelines?**
 - A. Infants under 1 year**
 - B. Between 1 year and puberty**
 - C. Teenagers aged 13 to 18**
 - D. Children from 5 to 12 years**

- 6. What is the A-pillar of a car?**
 - A. Separates the front and rear side windows**
 - B. Separates the windshield and side window**
 - C. Separates rear side windows from rear windshield**
 - D. Supports the roof structure of the car**

- 7. Why is it significant to check blood glucose levels in unconscious patients?**
- A. To assess kidney function**
 - B. To identify potential hypoglycemia, which can be rapidly treated**
 - C. To monitor heart rate discrepancies**
 - D. To ensure proper oxygenation**
- 8. What is the compression to breath ratio for one rescuer CPR on infants?**
- A. 30:2**
 - B. 15:2**
 - C. 10:2**
 - D. 5:1**
- 9. What is the weight limit for the KED extrication device?**
- A. 300 lbs**
 - B. 400 lbs**
 - C. 500 lbs**
 - D. 600 lbs**
- 10. In the event of a cardiac chest pain call, what role does ASA primarily serve?**
- A. Pain relief**
 - B. Prevention of blood clots**
 - C. Reduction of heart rate**
 - D. Control of anxiety symptoms**

Answers

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

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Explanations

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1. What is automaticity in relation to cardiac cells?

- A. A cell's ability to relax
- B. A cell's ability to contract
- C. A cell's ability to generate its own electrical impulse**
- D. A cell's ability to respond to stimuli

Automaticity in cardiac cells refers specifically to the ability of these cells to generate their own electrical impulses without requiring external stimulation. This characteristic is particularly vital for certain types of cardiac cells, such as pacemaker cells located in the sinoatrial (SA) node of the heart. These pacemaker cells are essential for initiating the electrical signals that coordinate the heartbeat, setting the pace for the rest of the heart tissue. This property allows the heart to maintain a consistent rhythm and respond automatically to various physiological needs, such as increased demand for oxygen during exercise. The presence of automaticity means that the heart can continue to function independently even when external neural input is reduced or absent, making it a foundational concept in understanding cardiac physiology and rhythm management.

2. What is the TBSA percentage for an adult arm?

- A. 6%
- B. 9%**
- C. 12%
- D. 18%

The total body surface area (TBSA) percentage for an adult arm is 9%. This percentage is determined based on the "Rule of Nines," which is a method used to estimate the size of burns on the human body. According to this rule, the adult body's surface area is divided into sections that represent approximately 9% or multiples of 9% of the TBSA, making it easy to calculate. In this context, each arm is allocated 9% of the TBSA. For further clarity, the head and neck account for 9%, each leg for 18%, the anterior trunk for 18%, the posterior trunk for 18%, and the perineum for 1%. Understanding the TBSA percentages is crucial for assessing burns, determining treatment plans, and guiding fluid resuscitation in burned patients.

3. What does the equation stroke volume (SV) x heart rate (HR) calculate?

- A. Blood volume
- B. Cardiac output**
- C. Blood pressure
- D. Stroke index

The equation that multiplies stroke volume (SV) by heart rate (HR) calculates cardiac output (CO). Cardiac output is a crucial metric that indicates the volume of blood the heart pumps per minute, essentially reflecting the efficiency of the heart in delivering oxygen-rich blood to the body's tissues. Stroke volume is the amount of blood ejected from the heart with each heartbeat, while heart rate is the number of beats per minute. By multiplying these two values, you can determine how much blood is being circulated throughout the body in one minute. Cardiac output is integral in assessing the cardiovascular health and performance under different physiological conditions, such as exercise or rest. This calculation helps healthcare professionals understand how well the heart is functioning and can influence treatment decisions in various emergencies or medical situations.

4. What does "dromotropy" indicate about the heart?

- A. The strength of heart contractions
- B. The speed of the heart's electrical impulses**
- C. The heart's rate
- D. The efficiency of blood pumping

Dromotropy refers specifically to the conduction velocity or speed of electrical impulses as they travel through the heart's conduction system, particularly in the atrioventricular (AV) node. This term is particularly important in understanding how quickly the heart can respond to signals, which is crucial during scenarios involving increased physical demand or stress. The speed of these electrical impulses directly affects the timing of heart contractions. If dromotropy is increased, it means that the heart is able to transmit impulses more quickly, which can result in a more efficient heart rate and synchronization of contractions. This is essential for maintaining an effective heartbeat and ensuring that the chambers of the heart work together properly. The other options, such as the strength of heart contractions, the heart's rate, and the efficiency of blood pumping, relate to different cardiac properties like inotropy, chronotropy, and overall cardiac output, respectively. Each of these terms describes distinct functions of the heart, but they do not pertain to the conduction speed of electrical impulses as dromotropy does. Thus, the emphasis on the speed of the heart's electrical impulses is what solidifies the correctness of this answer.

5. What is the most appropriate age range for a child in pediatric CPR guidelines?

- A. Infants under 1 year
- B. Between 1 year and puberty**
- C. Teenagers aged 13 to 18
- D. Children from 5 to 12 years

The most appropriate age range for a child in pediatric CPR guidelines is indeed considered to be between 1 year and puberty. This classification reflects the recognition that children in this age group have distinct physiological and anatomical differences from infants and adults, which impacts how they should be treated during cardiac emergencies. Pediatric CPR guidelines emphasize that during resuscitation, the techniques and compressions used need to be adapted based on the child's developmental stage to ensure efficacy and safety. For children aged 1 year to puberty, rescuers typically use one or two hands for chest compressions, depending on the size of the child, whereas techniques for infants, who require different approaches due to their smaller size, differ significantly. Utilizing this specific age range helps ensure that care is appropriate as a child's body and responses to cardiac emergencies are very different from those of older teenagers and adults. Identifying the patient as a child within this designated age range allows caregivers to follow the correct protocols, thus increasing the likelihood of a successful resuscitation outcome.

6. What is the A-pillar of a car?

- A. Separates the front and rear side windows
- B. Separates the windshield and side window**
- C. Separates rear side windows from rear windshield
- D. Supports the roof structure of the car

The A-pillar of a car serves as the vertical support on either side of the windshield and connects the windshield to the vehicle's body. This structure is crucial for maintaining the integrity of the vehicle, providing strength and stability, especially in the event of a collision. It also is vital for the attachment of the front windows and plays a role in the overall aerodynamics of the vehicle. The option relating to the separation of the windshield and side window correctly identifies the A-pillar's location and function within the car's design.

7. Why is it significant to check blood glucose levels in unconscious patients?

- A. To assess kidney function
- B. To identify potential hypoglycemia, which can be rapidly treated**
- C. To monitor heart rate discrepancies
- D. To ensure proper oxygenation

Checking blood glucose levels in unconscious patients is essential primarily to identify potential hypoglycemia. Hypoglycemia, or low blood sugar, can lead to a range of serious complications if not promptly addressed, including confusion, seizures, loss of consciousness, and even death. In emergency settings, recognizing hypoglycemia can be particularly critical because it is a reversible cause of unconsciousness. When a patient is unconscious, the ability to communicate or assess their condition through typical signs or symptoms is compromised. Measuring blood glucose levels allows healthcare providers to quickly determine if low blood sugar is the cause of the patient's state, enabling rapid intervention, such as administering glucose, which can quickly restore consciousness and stabilize the patient. While other assessments such as kidney function, heart rate, and oxygenation are important in a comprehensive evaluation of a patient's health status, they do not provide an immediate and potentially life-saving treatment as effectively as addressing hypoglycemia in an unconscious patient. Therefore, the focus on blood glucose in this scenario emphasizes the urgency and importance of managing this specific condition.

8. What is the compression to breath ratio for one rescuer CPR on infants?

- A. 30:2**
- B. 15:2**
- C. 10:2**
- D. 5:1**

The compression to breath ratio for one rescuer CPR on infants is correctly noted as 30:2. This ratio indicates that for every 30 chest compressions administered, the rescuer should provide 2 rescue breaths. This approach is essential in maintaining adequate circulation and oxygenation during cardiac arrest. For infants, effective chest compressions are vital for generating blood flow, while rescue breaths help to ensure that the oxygen levels in the blood are replenished. The 30:2 ratio is designed to strike a balance between providing sufficient compressions to support circulation and ensuring that adequate breaths are given to support respiratory needs. This standard ratio reflects current resuscitation guidelines and emphasizes the importance of rapid and effective intervention during an emergency event. It is particularly critical in infant CPR because infants have different anatomical and physiological considerations compared to adults and children, requiring specific techniques and ratios to optimize outcomes during resuscitation efforts.

9. What is the weight limit for the KED extrication device?

- A. 300 lbs**
- B. 400 lbs**
- C. 500 lbs**
- D. 600 lbs**

The KED (Kendrick Extrication Device) is designed to facilitate the safe and efficient extrication of patients from challenging environments, such as motor vehicle accidents, while maintaining spinal stabilization. The correct weight limit for the KED is 500 lbs. This capacity ensures that the device can accommodate a wide range of patients, including those who may be heavier or larger, which is crucial in emergency situations where access and time are critical. The KED's construction allows for the distribution of weight and effective immobilization, which is particularly important to prevent further injury during transport. It's also designed with safety features that help secure the patient while allowing for spinal precautions to be maintained. Understanding the weight limit is essential for paramedics to ensure the proper use of the device and to make appropriate decisions regarding patient transportation and the need for additional equipment or personnel if a patient exceeds the recommended limits. This knowledge helps in ensuring patient safety and optimizing care during critical interventions.

10. In the event of a cardiac chest pain call, what role does ASA primarily serve?

- A. Pain relief**
- B. Prevention of blood clots**
- C. Reduction of heart rate**
- D. Control of anxiety symptoms**

Aspirin, commonly referred to by its abbreviation ASA (Acetylsalicylic Acid), primarily serves the role of preventing blood clots during a cardiac emergency, such as a heart attack or chest pain that could be related to cardiac issues. When a person experiences cardiac chest pain, it is often due to a blockage of blood flow to the heart muscle, commonly caused by a clot in a coronary artery. By inhibiting platelet aggregation, aspirin prevents the formation of new clots and can help to maintain blood flow to the heart muscle. This makes it a crucial medication in managing conditions like acute coronary syndrome. The timely administration of aspirin can significantly improve outcomes for patients by reducing the risk of further clot formation and potentially minimizing damage to the heart. In contrast, while pain relief is important in such situations, it is not the primary role of ASA. Similarly, aspirin does not directly control heart rate or alleviate anxiety symptoms, which are secondary concerns in a cardiac emergency. Therefore, the key function of ASA in this context is its effectiveness in preventing blood clots.

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://jibccpcp.examzify.com>

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

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