

New Jersey Emergency Medical Dispatch (EMD) Practice Exam (Sample)

Study Guide



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SAMPLE

Questions

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- 1. Which factor is most important when prioritizing response to an emergency situation?**
 - A. The location of the incident**
 - B. The severity of the medical condition**
 - C. The time of day**
 - D. The availability of transportation**
- 2. Which of the following statements is true regarding BLS and EMD?**
 - A. They are the only parts of the EMS system**
 - B. They both require extensive medical training**
 - C. They serve different roles within the EMS system**
 - D. They are synonymous and interchangeable terms**
- 3. In dealing with shock, what is one recommended action?**
 - A. Encourage the patient to eat and drink**
 - B. Calm and reassure the patient**
 - C. Put the patient in a standing position**
 - D. Immediate transfer to surgery**
- 4. How do EMDs handle situations involving minors?**
 - A. By making decisions independently**
 - B. By involving parents or guardians in the communication**
 - C. By dismissing the call as not urgent**
 - D. By requiring a separate adult on the line**
- 5. What is "emotional intelligence" in the context of EMD?**
 - A. The ability to memorize protocols quickly**
 - B. The ability to understand and manage emotional dynamics during calls**
 - C. The skill to provide direct medical intervention**
 - D. The knowledge of various medical terminologies**

- 6. What is a common respiratory muscle essential for inhalation?**
- A. Thigh muscle**
 - B. Diaphragm**
 - C. Intercostal muscle**
 - D. Cardiac muscle**
- 7. Which organs are included in the genito-urinary system?**
- A. Kidneys, heart, lungs**
 - B. Kidneys, ureters, urinary bladder, urethra, genitalia**
 - C. Liver, pancreas, urethra**
 - D. Colon, intestine, urinary bladder**
- 8. In what situation is it considered imperative to ask about the caller's medical history?**
- A. When the caller sounds distressed**
 - B. When symptoms indicate a potential severe outcome**
 - C. When the conversation is lengthy**
 - D. When the emergency dispatcher senses hesitation**
- 9. Which condition falls under unconscious or fainting instructions?**
- A. Unconscious airway control (non-trauma)**
 - B. Severe allergic reaction**
 - C. Cardiac arrest**
 - D. Breathing problems**
- 10. What system contains motor and sensory nerves?**
- A. Central nervous system**
 - B. Peripheral nervous system**
 - C. Sympathetic nervous system**
 - D. Cognitive nervous system**

Answers

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

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Explanations

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1. Which factor is most important when prioritizing response to an emergency situation?

- A. The location of the incident**
- B. The severity of the medical condition**
- C. The time of day**
- D. The availability of transportation**

The severity of the medical condition is the most important factor when prioritizing response to an emergency situation. This consideration is crucial because it directly impacts the urgency of care required for the patient. An assessment of the medical condition helps determine whether immediate interventions are necessary and what level of resources needs to be dispatched. In emergencies, the most critical aspect is often the potential for loss of life or serious injury, which is dictated by the severity of the medical condition. For example, a patient experiencing cardiac arrest requires immediate response and advanced care, whereas a less critical issue might allow for a little more time before help arrives. Therefore, prioritizing based on severity ensures that care is directed to those who need it the most urgently, effectively improving patient outcomes and optimizing the use of emergency resources.

2. Which of the following statements is true regarding BLS and EMD?

- A. They are the only parts of the EMS system**
- B. They both require extensive medical training**
- C. They serve different roles within the EMS system**
- D. They are synonymous and interchangeable terms**

The correct statement highlights that Basic Life Support (BLS) and Emergency Medical Dispatch (EMD) serve different roles within the Emergency Medical Services (EMS) system. BLS is primarily focused on providing fundamental life-saving treatment, such as cardiopulmonary resuscitation (CPR) and the use of automated external defibrillators (AEDs) by trained personnel at the scene of medical emergencies. On the other hand, EMD involves the management of emergency calls; it entails the systematic approach to dispatching emergency services and providing pre-arrival instructions to callers. Understanding the distinct roles is crucial in ensuring that patients receive timely and appropriate medical assistance. While both BLS and EMD are integral components of the EMS system, they operate at different levels and function to complement one another, ensuring a seamless response to emergencies. This differentiation is essential for adequately training personnel and optimizing the response to emergency situations.

3. In dealing with shock, what is one recommended action?

- A. Encourage the patient to eat and drink
- B. Calm and reassure the patient**
- C. Put the patient in a standing position
- D. Immediate transfer to surgery

Calming and reassuring the patient is a vital response when dealing with shock. This approach helps to manage the patient's anxiety and fear, which can worsen their condition. Shock can induce significant psychological distress, so providing emotional support is crucial for maintaining a sense of security. Reassuring the patient can aid in stabilizing their heart rate and blood pressure, making them feel more comfortable while awaiting further medical assistance. Addressing the other choices, encouraging a patient to eat and drink is inappropriate in cases of shock, as their condition may prevent proper digestion and risk choking or aspiration. Putting the patient in a standing position can exacerbate shock symptoms due to decreased blood flow to vital organs. Immediate transfer to surgery might be necessary in specific traumatic cases but is not generally applied as a standard recommendation for all shock situations without prior assessment. Therefore, calming and reassuring the patient is the best course of action to promote their overall well-being during this critical moment.

4. How do EMDs handle situations involving minors?

- A. By making decisions independently
- B. By involving parents or guardians in the communication**
- C. By dismissing the call as not urgent
- D. By requiring a separate adult on the line

In emergency medical dispatch (EMD) situations involving minors, it is crucial to involve parents or guardians in the communication. This approach is essential for several reasons, primarily focusing on the safety and well-being of the child. Engaging the parents or guardians helps to ensure that the EMD can gather accurate medical history and context for the situation, which is vital for providing appropriate guidance and resources. Additionally, the involvement of a parent or guardian can facilitate better decision-making, as they may have insights into the child's medical needs or history that could impact the emergency response. Establishing communication with a responsible adult ensures that any decisions made during the call are informed and supported by someone who is authorized to act on behalf of the minor. By facilitating this communication, EMDs can effectively coordinate emergency response efforts and convey critical information to responding medical personnel, thus enhancing the overall care and support provided to the minor in an emergency situation.

5. What is "emotional intelligence" in the context of EMD?

- A. The ability to memorize protocols quickly**
- B. The ability to understand and manage emotional dynamics during calls**
- C. The skill to provide direct medical intervention**
- D. The knowledge of various medical terminologies**

In the context of Emergency Medical Dispatch (EMD), emotional intelligence refers to the ability to understand and manage emotional dynamics during calls. This skill is crucial for EMD personnel as they often interact with callers who are in distress, panicked, or experiencing a crisis. By demonstrating emotional intelligence, a dispatcher can maintain calm communication, show empathy, and effectively assess the situation while providing necessary assistance. This understanding allows dispatchers to navigate complex emotional situations, facilitating better communication with the caller. It also helps in gaining trust and ensuring that the caller feels supported, which can contribute to gathering critical information and making timely decisions during emergencies. Emotional intelligence fosters a connection that can help alleviate the caller's anxiety, making them more receptive to instructions and guidance provided by the dispatcher.

6. What is a common respiratory muscle essential for inhalation?

- A. Thigh muscle**
- B. Diaphragm**
- C. Intercostal muscle**
- D. Cardiac muscle**

The diaphragm is a critical respiratory muscle that plays a prominent role in inhalation. It is a dome-shaped muscle located at the base of the thoracic cavity, separating the chest from the abdomen. When the diaphragm contracts, it flattens, increasing the volume of the thoracic cavity. This expansion creates a negative pressure that allows air to flow into the lungs. The diaphragm's active involvement in this process makes it essential for effective breathing. In addition to the diaphragm, the intercostal muscles, situated between the ribs, also aid in the respiratory process by expanding and contracting the rib cage during inhalation and exhalation. However, the diaphragm is often regarded as the primary muscle responsible for initiating the inhalation process due to its direct effect on lung volume and pressure changes. The thigh muscle and cardiac muscle serve different functions and are not involved in the respiratory process. The thigh muscle is primarily responsible for movements of the leg, while cardiac muscle is specialized for the contraction of the heart, facilitating blood circulation rather than respiration. Thus, the diaphragm stands out as the most critical muscle in this context.

7. Which organs are included in the genito-urinary system?

- A. Kidneys, heart, lungs
- B. Kidneys, ureters, urinary bladder, urethra, genitalia**
- C. Liver, pancreas, urethra
- D. Colon, intestine, urinary bladder

The genito-urinary system, also known as the urogenital system, primarily involves the organs responsible for both the production and excretion of urine as well as the reproductive functions. The correct answer encompasses the kidneys, ureters, urinary bladder, urethra, and genitalia - all essential components of this system. The kidneys are crucial for filtering blood and producing urine, while the ureters transport urine from the kidneys to the urinary bladder. The urinary bladder serves as a storage reservoir for urine until it is excreted through the urethra. Additionally, genitalia play a role in reproduction and are integral to the urogenital system, linking urinary and reproductive functions. This holistic inclusion of both urinary and reproductive organs is what qualifies this answer as the correct one, highlighting the interconnected nature of these bodily systems.

8. In what situation is it considered imperative to ask about the caller's medical history?

- A. When the caller sounds distressed
- B. When symptoms indicate a potential severe outcome**
- C. When the conversation is lengthy
- D. When the emergency dispatcher senses hesitation

The situation where it is imperative to ask about the caller's medical history is when symptoms indicate a potential severe outcome. In emergencies, understanding the patient's medical history can provide critical insights that influence the urgency and type of care required. For example, if a caller is experiencing chest pain, knowing whether they have a history of heart disease, hypertension, diabetes, or previous heart attacks can help dispatchers and responders make informed decisions regarding the treatment and transport options. Gathering medical history in these cases can also help in identifying potentially life-threatening conditions, which can dictate a faster response or specialized assistance. Immediate insights into previous medical conditions, medications, allergies, and any recent surgeries can significantly improve outcomes by enabling paramedics and emergency personnel to prepare in advance for specific interventions or treatments that may be necessary upon arrival.

9. Which condition falls under unconscious or fainting instructions?

- A. Unconscious airway control (non-trauma)**
- B. Severe allergic reaction**
- C. Cardiac arrest**
- D. Breathing problems**

The condition that falls under unconscious or fainting instructions is unconscious airway control (non-trauma). This scenario is crucial for emergency medical dispatch as it involves a patient who is unresponsive and requires immediate assessment and intervention to maintain a patent airway. When someone is unconscious, there is a significant risk that their airway could become obstructed either due to the tongue relaxing backward or potential aspiration of fluids. In such situations, dispatchers must guide the responding medical team or bystanders to implement airway control techniques to ensure the patient can breathe and receive sufficient oxygen. This involves prioritizing airway management as part of the initial assessment and intervention for unconscious patients. Other options such as a severe allergic reaction, cardiac arrest, and breathing problems may require immediate attention and specific instruction, but they do not primarily focus on the management of an unconscious individual. Each of those conditions, while critical, follow different protocols that address their specific physiological concerns rather than the urgent need for maintaining airway patency associated specifically with unconsciousness.

10. What system contains motor and sensory nerves?

- A. Central nervous system**
- B. Peripheral nervous system**
- C. Sympathetic nervous system**
- D. Cognitive nervous system**

The peripheral nervous system (PNS) is responsible for connecting the central nervous system (CNS) to the limbs and organs. It comprises all the nerves that lie outside the brain and spinal cord, including both motor (efferent) and sensory (afferent) nerves. Motor nerves transmit signals from the CNS to muscles, enabling movement, while sensory nerves carry information from sensory receptors back to the CNS, allowing for the perception of stimuli such as touch, pain, and temperature. The other systems mentioned do not encapsulate both types of nerves together. The central nervous system consists solely of the brain and spinal cord, focusing on processing and sending information rather than transmitting signals out into the body, which is the domain of the peripheral nervous system. The sympathetic nervous system, part of the autonomic nervous system, specifically handles the body's "fight or flight" responses and is one segment of the larger peripheral system. The term "cognitive nervous system" is not a recognized category within the field, making it an incorrect choice for this question.