

New Mexico Scope of Practice EMT Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

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

SAMPLE

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

SAMPLE

- 1. How many continuing education hours are required for EMT recertification?**
 - A. 60 total**
 - B. 20 total**
 - C. 40 total**
 - D. 80 total**

- 2. Which provider is typically the first trained professional to arrive on an emergency scene to provide initial medical assistance?**
 - A. Paramedic**
 - B. EMR**
 - C. EMT**
 - D. AEMT**

- 3. During the trauma secondary assessment, which activity is performed?**
 - A. Immediate defibrillation**
 - B. Administer aspirin**
 - C. On-scene time calculations**
 - D. Head-to-toe assessment**

- 4. Which option correctly lists the adult albuterol dose via inhalation nebulizer?**
 - A. 0.5 mg via nebulizer**
 - B. 10 mg via nebulizer**
 - C. 2.5 mg via nebulizer**
 - D. 2.5-5 mg via nebulizer (up to 10 mg)**

- 5. Which statement accurately describes Level 3 trauma centers?**
 - A. Clinical hours only**
 - B. 24/7 trauma available**
 - C. 24/7 trauma not available**
 - D. Surgery on call**

- 6. In JumpSTART, a child with no pulse is tagged what color?**
- A. Yellow**
 - B. Green**
 - C. Black**
 - D. Red**
- 7. Epinephrine is indicated for which of the following conditions?**
- A. Hypotension**
 - B. Dehydration**
 - C. Severe bronchoconstriction from asthma and COPD**
 - D. Hyperglycemia**
- 8. In JumpSTART, after opening the airway for a not-breathing child with a pulse, how many rescue breaths are given?**
- A. Two rescue breaths**
 - B. Five rescue breaths**
 - C. Ten rescue breaths**
 - D. One rescue breath**
- 9. Which program defines S-T Elevation Myocardial Infarction (STEMI) and establishes guidelines for STEMI care and transport?**
- A. EMSCOM**
 - B. STEMI Program**
 - C. NM Communications system**
 - D. Stroke Program**
- 10. Adult Narcan dosage according to the guidelines: which option is correct?**
- A. 0.4 mg IM**
 - B. 2 mg IN**
 - C. 0.1 mg/kg IM**
 - D. 0.4-2 mg IM (0.4-0.8 dose increments) or 2 mg IN**

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. How many continuing education hours are required for EMT recertification?

- A. 60 total**
- B. 20 total**
- C. 40 total**
- D. 80 total**

Continuing education hours for recertification are set to ensure you stay current with EMS knowledge and skills over the renewal period. In New Mexico, the EMS Bureau requires 40 hours of approved continuing education during each two-year recertification cycle. This amount is designed to balance thorough refreshment of essential topics—like patient assessment, medical and trauma management, updated protocols, and pharmacology updates—without overburdening you. The other hour totals don't align with the state standard: fewer hours would not meet the requirement, while substantially more hours would exceed what the state mandates.

2. Which provider is typically the first trained professional to arrive on an emergency scene to provide initial medical assistance?

- A. Paramedic**
- B. EMR**
- C. EMT**
- D. AEMT**

The first trained professional to arrive on an emergency scene is the Emergency Medical Responder. EMRs are equipped to get to a scene quickly and begin immediate care to stabilize a patient and ensure scene safety while waiting for higher-level responders. Their scope focuses on rapid assessment, basic life support tasks like CPR and AED use, controlling severe bleeding, and assisting with basic airway management. This quick initial care is what helps keep a patient alive and sets the stage for more advanced care from EMTs, AEMTs, or paramedics who arrive later with greater skills and medications. Paramedics bring advanced life support, including more complex airway management and medications, but they typically arrive after the scene has been secured and after EMRs have initiated treatment. EMTs provide essential basic life support as well, yet EMRs are the ones trained specifically to be the fastest to respond and start care immediately. AEMTs occupy a level between EMTs and paramedics, offering more than EMTs but less than paramedics, and they aren't typically the first on scene.

3. During the trauma secondary assessment, which activity is performed?

- A. Immediate defibrillation**
- B. Administer aspirin**
- C. On-scene time calculations**
- D. Head-to-toe assessment**

In trauma care, after the primary survey and stabilization, the clinician performs a head-to-toe assessment to uncover injuries that aren't immediately life-threatening but still require care. This secondary survey is a systematic, patient-by-patient check from head to toe, using inspection, palpation, and, when appropriate, auscultation to identify injuries that may not be obvious at first glance. It often involves looking for signs summarized as DCAP-BTLS—deformation, contusion, abrasion, puncture/penetration, burn, tenderness, laceration, swelling—to ensure no injury is missed. This thorough examination supports documenting findings, guiding treatment decisions, and informing transport priorities. Immediate defibrillation is part of addressing life threats during the primary survey when the patient is pulseless or in a shockable rhythm. Administering aspirin is a medical protocol for chest pain or suspected heart attack, not a trauma secondary assessment. On-scene time calculations pertain to scene management and transport decisions, not the actual physical examination.

4. Which option correctly lists the adult albuterol dose via inhalation nebulizer?

- A. 0.5 mg via nebulizer**
- B. 10 mg via nebulizer**
- C. 2.5 mg via nebulizer**
- D. 2.5-5 mg via nebulizer (up to 10 mg)**

When delivering albuterol by nebulizer to an adult, you use a dose that is effective but safe across different severities of bronchospasm. The typical per-dose amount is 2.5 mg, and in more significant symptoms you may use 5 mg. In many EMS protocols, you can repeat doses with a total dose not to exceed about 10 mg in a single episode. This approach provides enough bronchodilation to relieve obstruction while limiting systemic side effects like tachycardia or tremor. A dose of 0.5 mg is far too small to be reliably effective, while giving 10 mg in one dose is generally beyond standard single-dose practice; the range of 2.5-5 mg per dose, with a cumulative maximum around 10 mg, best fits typical guidelines.

5. Which statement accurately describes Level 3 trauma centers?

- A. Clinical hours only**
- B. 24/7 trauma available**
- C. 24/7 trauma not available**
- D. Surgery on call**

Level 3 trauma centers are set up to stabilize patients and arrange transfer to a higher level of care rather than provide constant, full-scale trauma surgery in-house. That means trauma care is commonly available during regular clinical hours, with systems in place to activate transfer or call in specialists as needed. Because definitive, 24/7 trauma services and in-house surgical staff are hallmarks of higher-level centers, the description that best fits Level 3 centers is that their trauma coverage is limited to clinical hours. Some centers may have on-call surgeons, but the standard expectation is not around-the-clock trauma capability. The other statements imply 24/7 trauma access or guaranteed in-house surgery, which doesn't align with the typical Level 3 model.

6. In JumpSTART, a child with no pulse is tagged what color?

- A. Yellow**
- B. Green**
- C. Black**
- D. Red**

In JumpSTART, you use color tags to quickly sort pediatric patients by urgency and chance of survival. Black is reserved for those who are deceased or whose injuries are such that survival is not expected in a mass-casualty setting. A child with no pulse has no circulating blood flow, which means there isn't a realistic chance for rapid improvement with field care while resources are limited. For that reason, this situation is tagged Black. This system helps responders prioritize those who still have a chance of survival for immediate intervention, while directing attention away from those unlikely to benefit from on-scene care.

7. Epinephrine is indicated for which of the following conditions?

- A. Hypotension**
- B. Dehydration**
- C. Severe bronchoconstriction from asthma and COPD**
- D. Hyperglycemia**

Epinephrine helps by opening the airways and tightening surrounding blood vessels, which is why it's used for severe bronchoconstriction. Its action on beta-2 receptors relaxes bronchial smooth muscle, rapidly improving airflow in asthma or COPD flare-ups, and its alpha-adrenergic effect reduces airway swelling to further ease breathing. The other conditions listed aren't treated with epinephrine as a primary indication—dehydration is addressed with fluids, hyperglycemia with glucose control, and hypotension alone isn't treated with epinephrine unless it's part of anaphylaxis where it helps raise blood pressure. So the best choice is the option describing severe bronchoconstriction from asthma and COPD.

8. In JumpSTART, after opening the airway for a not-breathing child with a pulse, how many rescue breaths are given?

- A. Two rescue breaths
- B. Five rescue breaths**
- C. Ten rescue breaths
- D. One rescue breath

In JumpSTART, the aim is to rapidly ventilate a child who is not breathing but has a pulse, to quickly determine if ventilation can restore breathing. After you open the airway, you deliver five rescue breaths in succession. Each breath should be about one second and aimed at causing visible chest rise. This quick set of breaths serves to ventilate the lungs and assess whether spontaneous breathing returns. After giving these five breaths, you immediately reassess for breathing and signs of life and then proceed with the next steps of the JumpSTART protocol. The five-breath approach is specific to this pediatric triage/resuscitation method; smaller or larger numbers wouldn't fit the protocol's rapid ventilation check.

9. Which program defines S-T Elevation Myocardial Infarction (STEMI) and establishes guidelines for STEMI care and transport?

- A. EMSCOM
- B. STEMI Program**
- C. NM Communications system
- D. Stroke Program

The question tests understanding of which organized program sets the rules for recognizing a STEMI and guiding how it should be cared for and transported. The STEMI Program is the one that defines what constitutes a STEMI and establishes the guidelines for in-field assessment, rapid activation of STEMI protocols, and transport to appropriate facilities (such as PCI-capable centers) with prehospital notification and streamlined handoffs. This creates a standardized approach across EMS agencies so patients receive timely, consistent care. Other options don't fit because they describe broad systems or programs that aren't specifically about STEMI care. EMSCOM centers on dispatch and communications in emergencies, which is essential for coordination but doesn't define STEMI criteria or transport guidelines. The NM Communications system is a general communications framework and isn't dedicated to STEMI care standards. The Stroke Program focuses on stroke care, not myocardial infarction. Therefore, the STEMI Program is the entity that defines STEMI and its care and transport guidelines.

10. Adult Narcan dosage according to the guidelines: which option is correct?

A. 0.4 mg IM

B. 2 mg IN

C. 0.1 mg/kg IM

D. 0.4-2 mg IM (0.4-0.8 dose increments) or 2 mg IN

Naloxone dosing in adults is titratable and route-dependent, aimed at reversing respiratory depression while avoiding unnecessary withdrawal or adverse effects. The best option reflects flexible dosing you can adjust based on the patient's response. Starting with a small IM dose of 0.4 mg and repeating in 0.4-0.8 mg increments up to 2 mg IM lets you titrate to effect. If using intranasal delivery, a 2 mg dose is a practical option. This approach captures the need to tailor dosing rather than sticking to a single fixed amount.

SAMPLE

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://nmscopeofpracticeemt.examzify.com>

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

SAMPLE