

New York State Basic Emergency Medical Technician (EMT-B) Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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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 technique is recommended for assisting a conscious patient with medication under distress?**
 - A. Encourage the patient to inhale the pill
 - B. Instruct the patient to place the pill on their tongue
 - C. Advise the patient to swallow the pill quickly
 - D. Guide the patient to dissolve the pill in water
- 2. What formula is used to calculate cardiac output?**
 - A. Heart Rate / Stroke Volume
 - B. Stroke Volume x Heart Rate
 - C. Heart Rate + Stroke Volume
 - D. Stroke Volume / Heart Rate
- 3. A patient with a head injury from a baseball bat is likely to have which additional injury?**
 - A. Hypothermia
 - B. Hypertensive shock due to blood loss
 - C. Spinal injuries
 - D. Lung collapse
- 4. What should be done if a gag reflex occurs after inserting an oropharyngeal airway?**
 - A. Leave the airway in place
 - B. Remove the airway
 - C. Advance the airway further into the throat
 - D. Use a different type of airway
- 5. What is the primary purpose of using a tourniquet in emergency care?**
 - A. To remove all blood supply to a limb
 - B. To stop severe bleeding
 - C. To immobilize a fractured limb
 - D. To reduce pain during transport

- 6. What should be included in the care of a patient with suspected internal bleeding?**
- A. Allow the patient to eat and drink
 - B. Splint all suspected fractures without delaying transport
 - C. Maintain the patient's position
 - D. Apply heat packs to the abdomen
- 7. If a patient is experiencing shock, what physiological response primarily contributes to the condition?**
- A. Increased blood volume
 - B. Decreased cardiac output
 - C. Increased heart rate
 - D. Vasoconstriction of peripheral vessels
- 8. What does the term "medial" refer to in anatomical positioning?**
- A. Closer to the point of attachment
 - B. Toward the midline
 - C. Away from the point of attachment
 - D. Back
- 9. Where does gaseous exchange primarily occur in the lungs?**
- A. Bronchi
 - B. Trachea
 - C. Alveoli
 - D. Diaphragm
- 10. A severe heat emergency is characterized by which of the following?**
- A. Cool, clammy skin
 - B. Hot, dry skin
 - C. Pale, sweaty skin
 - D. Warm, moist skin

Answers

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

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Explanations

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1. What technique is recommended for assisting a conscious patient with medication under distress?

- A. Encourage the patient to inhale the pill
- B. Instruct the patient to place the pill on their tongue**
- C. Advise the patient to swallow the pill quickly
- D. Guide the patient to dissolve the pill in water

Instructing the patient to place the pill on their tongue is the recommended technique for assisting a conscious patient with medication under distress because this method allows for a more controlled and safe means of taking medication. When the pill is placed on the tongue, the patient can take the necessary time to ensure that they are ready to swallow it, which is especially important if they are feeling anxious or are in distress. By placing the pill on the tongue, the patient can also make sure they are in a comfortable position and can prepare to swallow, reducing the risk of choking. Additionally, it provides the opportunity to offer water, ensuring that the patient is able to swallow the medication effectively once they feel ready. This technique respects the patient's autonomy and allows them to determine the best moment for ingestion. Other options, such as encouraging inhalation of the pill or advising the patient to swallow quickly, can increase the risk of complications like choking. The guiding of dissolving the pill in water may not always be practical or suitable, particularly if the medication is not designed to be taken that way or has specific instructions for administration. Overall, placing the pill on the tongue is the safest and most effective approach in this situation.

2. What formula is used to calculate cardiac output?

- A. Heart Rate / Stroke Volume
- B. Stroke Volume x Heart Rate**
- C. Heart Rate + Stroke Volume
- D. Stroke Volume / Heart Rate

Cardiac output is a critical measurement in understanding how effectively the heart is pumping blood throughout the body. The correct formula to calculate cardiac output is derived from two key components: stroke volume and heart rate. Stroke volume refers to the amount of blood ejected by the heart with each beat, while heart rate indicates how many times the heart beats in one minute. By multiplying stroke volume by heart rate, you obtain the total volume of blood the heart pumps in a minute, thus yielding cardiac output. This relationship is essential in assessing cardiovascular function—higher cardiac output indicates better circulation, especially during physical activity or in response to certain medical conditions. The other options present alternative calculations that do not accurately reflect the relationship between heart rate and stroke volume in determining cardiac output. They either suggest incorrect operations (like division or addition) or misapply the roles of these two critical factors. Understanding this formula is important for EMTs when evaluating patients in various clinical situations.

3. A patient with a head injury from a baseball bat is likely to have which additional injury?

- A. Hypothermia
- B. Hypertensive shock due to blood loss
- C. Spinal injuries**
- D. Lung collapse

When assessing a patient with a head injury, especially from a blunt force trauma like being struck by a baseball bat, it is essential to consider the potential for associated injuries. In this case, the likelihood of spinal injuries is significant. Blunt trauma to the head often involves forces that may also transmit down the spine, potentially leading to injuries in this area. Such injuries can range from concussions and contusions to fractures of the cervical vertebrae. The mechanism of injury—where a substantial impact is involved—raises the risk of not only head trauma but also injury to the spine, particularly in the cervical region, where the impact force is transferred from the head. The other options, such as hypothermia, hypertensive shock due to blood loss, and lung collapse, are less likely to be directly associated with a head injury from blunt trauma. Hypothermia is typically related to environmental factors rather than trauma; hypertensive shock is not the most immediate concern following head injury unless significant external bleeding is noted, and lung collapse would more likely be associated with penetrating trauma or chest injuries rather than blunt force to the head. Thus, considering the mechanism of injury, spinal injuries is the most logical additional injury to anticipate in this scenario.

4. What should be done if a gag reflex occurs after inserting an oropharyngeal airway?

- A. Leave the airway in place
- B. Remove the airway**
- C. Advance the airway further into the throat
- D. Use a different type of airway

When a gag reflex occurs after inserting an oropharyngeal airway, the appropriate action is to remove the airway. The presence of a gag reflex indicates that the airway is causing discomfort or is improperly placed, which could lead to additional complications, such as vomiting or aspiration. The main purpose of an oropharyngeal airway is to maintain airway patency in unconscious patients or those without a gag reflex; if the patient starts to gag, this response suggests that the airway is not suitable for that individual at that moment. It's critical to ensure that the patient's airway is clear and to switch to an alternative airway management technique if necessary, if the gag reflex persists. In situations where a patient can protect their airway, other methods like a nasopharyngeal airway or bag-valve-mask ventilation may be more appropriate.

5. What is the primary purpose of using a tourniquet in emergency care?

- A. To remove all blood supply to a limb
- B. To stop severe bleeding**
- C. To immobilize a fractured limb
- D. To reduce pain during transport

The primary purpose of using a tourniquet in emergency care is to stop severe bleeding. Tourniquets are specifically designed to control heavy, life-threatening hemorrhaging, particularly in situations of trauma where direct pressure is insufficient to halt blood flow. When applied correctly, a tourniquet creates a tight constriction around the limb that elevates venous blood pressure while effectively occluding arterial blood flow. This is critical in preventing exsanguination, which can lead to shock and death if not addressed promptly. While there may be instances where other interventions like immobilization or pain relief are necessary in emergency care, these are not the primary goals of a tourniquet. Its main function is to address severe bleeding directly, making it a vital tool in managing traumatic injuries effectively.

6. What should be included in the care of a patient with suspected internal bleeding?

- A. Allow the patient to eat and drink
- B. Splint all suspected fractures without delaying transport**
- C. Maintain the patient's position
- D. Apply heat packs to the abdomen

When caring for a patient with suspected internal bleeding, the priority is to minimize the risk of further injury and prioritize patient stability during transport. This often involves splinting suspected fractures, which can help reduce pain and prevent movement that might exacerbate internal bleeding. However, if reasonable suspicion exists, the emphasis should be on transporting the patient swiftly to medical facilities, as time is crucial in these circumstances. In contrast, allowing the patient to eat and drink can pose a risk if surgery is needed, as it may lead to complications related to anesthesia. Maintaining the patient's position should be focused on comfort and ensuring that their airway remains clear, but it doesn't always require strict adherence to a fixed position that may limit care. Applying heat packs to the abdomen is generally contraindicated in cases of suspected internal bleeding, as heat can exacerbate bleeding. The decision to prioritize splinting fractures aligns with the need to stabilize the patient while preparing for transport, highlighting the importance of a balanced approach to both fracture management and the treatment of suspected internal bleeding.

7. If a patient is experiencing shock, what physiological response primarily contributes to the condition?

- A. Increased blood volume
- B. Decreased cardiac output**
- C. Increased heart rate
- D. Vasoconstriction of peripheral vessels

The condition of shock is characterized by inadequate perfusion of tissues and organs, which can lead to cellular dysfunction and, if unaddressed, result in organ failure. A key physiological response that contributes to shock is decreased cardiac output. This occurs because the heart is unable to effectively pump enough blood to meet the body's demands, which can happen for various reasons such as loss of blood volume, pump failure, or extreme vasodilation. When cardiac output decreases, there is less blood circulating through the body, which reduces the supply of oxygen and nutrients to tissues, exacerbating the shock state. The body attempts to compensate for this by activating different mechanisms, but if cardiac output remains inadequate, shock progresses, leading to more severe consequences. While increased heart rate and vasoconstriction of peripheral vessels can occur as compensatory responses in an attempt to maintain perfusion, they do not directly contribute to shock itself. In fact, these responses aim to counteract the decreased cardiac output. Similarly, increased blood volume is generally not associated with shock; rather, shock often involves fluids being lost or inadequately pumped, leading to a decrease in effective circulating volume.

8. What does the term "medial" refer to in anatomical positioning?

- A. Closer to the point of attachment
- B. Toward the midline**
- C. Away from the point of attachment
- D. Back

The term "medial" refers to a position that is toward the midline of the body. In anatomical terminology, the midline acts as an imaginary line that divides the body into left and right halves. Therefore, when a structure is described as medial, it means that it is located nearer to this central axis. This term is frequently used in anatomy to provide clarity in describing the locations of various body parts or structures relative to one another. For example, the nose is medial to the ears, meaning it is closer to the midline of the body than the ears are. Understanding this terminology is essential for effective communication in the medical field, as it precisely describes positions and directions in the human body.

9. Where does gaseous exchange primarily occur in the lungs?

- A. Bronchi
- B. Trachea
- C. Alveoli**
- D. Diaphragm

Gaseous exchange primarily occurs in the alveoli, which are tiny air sacs located at the end of the bronchial tubes within the lungs. These structures are specifically adapted for this function due to their large surface area and thin walls, which facilitate the efficient diffusion of oxygen and carbon dioxide between the air in the alveoli and the blood in the surrounding capillaries. The alveoli are surrounded by numerous capillaries, creating a close relationship between the respiratory and circulatory systems. This arrangement allows oxygen from inhaled air to pass into the bloodstream, where it binds to hemoglobin in red blood cells, while carbon dioxide, a waste product of metabolism, moves from the blood into the alveoli to be exhaled. Other structures mentioned in the question serve different purposes in the respiratory system. The bronchi are responsible for conducting air from the trachea to the lungs but are not the site of gas exchange. The trachea acts as the windpipe that conducts air into the bronchi but also lacks the structural adaptations for gas exchange. The diaphragm is a muscle that plays a crucial role in breathing by contracting and relaxing to allow air to enter and exit the lungs but is not involved in the exchange of gases itself. Thus, the

10. A severe heat emergency is characterized by which of the following?

- A. Cool, clammy skin
- B. Hot, dry skin**
- C. Pale, sweaty skin
- D. Warm, moist skin

In a severe heat emergency, such as heat stroke, the body's ability to regulate temperature becomes impaired, which typically results in hot, dry skin. This occurs because the body is no longer able to sweat effectively, leading to an accumulation of heat. The skin may feel hot to the touch and will not exhibit the moisture that characterizes other heat-related illnesses like heat exhaustion, where the skin may still be sweaty due to the body's efforts to cool down. In heat emergencies, hot, dry skin is a significant indicator of a serious condition and necessitates immediate medical intervention. Recognizing this symptom is crucial for EMTs and first responders, as it helps in differentiating between varying degrees of heat-related illnesses and determines the urgency of treatment required.

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://newyorkstate-embt.examtify.com>

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

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