

NOCP Primary Care Paramedic Practice Test (Sample)

Study Guide



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SAMPLE

Questions

SAMPLE

- 1. What is crucial in assessing a patient with a suspected head injury?**
 - A. Checking temperature and pulse**
 - B. Assessing level of consciousness**
 - C. Monitoring oxygen levels**
 - D. Evaluating skin condition**
- 2. Which of the following defines a competent adult patient's right regarding their own body?**
 - A. Patient Advocacy**
 - B. Autonomy**
 - C. Beneficence**
 - D. Scope of Practice**
- 3. What is meant by circadian rhythm?**
 - A. A type of exercise regimen**
 - B. Physiological phenomena that occur at approximately 24-hour intervals**
 - C. A mental health condition**
 - D. Method of patient assessment**
- 4. In the Kubler-Ross model, which stage represents a phase of readiness to move on?**
 - A. Bargaining**
 - B. Denial**
 - C. Depression**
 - D. Acceptance**
- 5. What is the term used to describe a set of hours when a night shift worker can reliably expect to rest without interruption?**
 - A. Anchor time**
 - B. Critical Incident**
 - C. Demobilization**
 - D. CISM**

6. How often should the effectiveness of the medication be documented?

- A. Once a week**
- B. Immediately after administration**
- C. Only when the patient is discharged**
- D. After 30 minutes of observation**

7. What is the proper technique for hand washing?

- A. Just wetting hands before a procedure**
- B. Lather with shampoo, rinse, and dry**
- C. Lather with soap, scrub for at least 15 seconds, rinse under running water, and dry on a clean paper towel**
- D. Using an antibacterial gel only**

8. Which drug is commonly used to treat anaphylaxis?

- A. Atropine**
- B. Epinephrine**
- C. Aspirin**
- D. Ibuprofen**

9. Which of the following is an example of a physical stressor?

- A. A disagreement with a colleague**
- B. Poverty and financial issues**
- C. Excessive exercise without proper rest**
- D. Receiving negative feedback**

10. How long should the primary assessment typically take?

- A. 5 minutes if the patient is stable**
- B. More than 2 minutes to ensure thoroughness**
- C. Less than one minute unless life-saving measures are needed**
- D. Approximately 30 seconds without interruptions**

Answers

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

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Explanations

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1. What is crucial in assessing a patient with a suspected head injury?

- A. Checking temperature and pulse
- B. Assessing level of consciousness**
- C. Monitoring oxygen levels
- D. Evaluating skin condition

In the context of a patient with a suspected head injury, assessing the level of consciousness is crucial because it provides vital information about the patient's neurological status and potential brain function. Changes in consciousness can indicate the severity of the injury and the extent of any brain damage. For instance, a patient who is alert and oriented may have a less severe injury compared to someone who is drowsy or unresponsive, which could suggest increased intracranial pressure or significant trauma to the brain. Evaluating the level of consciousness often involves using standardized assessment tools like the Glasgow Coma Scale (GCS), which assesses eye, verbal, and motor responses. This helps paramedics and healthcare providers determine the necessary interventions and whether the patient requires immediate advanced care. While checking temperature and pulse, monitoring oxygen levels, and evaluating skin condition can be important in assessing a patient's overall health, they do not specifically address the unique risks and outcomes associated with head injuries. Thus, the level of consciousness serves as a critical indicator for any brain-related issues that may arise from such trauma.

2. Which of the following defines a competent adult patient's right regarding their own body?

- A. Patient Advocacy
- B. Autonomy**
- C. Beneficence
- D. Scope of Practice

The concept that defines a competent adult patient's right regarding their own body is autonomy. Autonomy refers to the principle that individuals have the right to make decisions about their own lives and bodies, free from coercion or interference. This includes the ability to give informed consent or refuse medical treatment based on their personal values, preferences, and beliefs. In a healthcare context, respecting a patient's autonomy is essential, as it acknowledges their capacity to understand information about their health and treatment options and to make choices aligned with their desires. This principle is foundational in medical ethics and emphasizes the importance of empowering patients to take an active role in their care. While patient advocacy focuses on supporting and promoting the interests of patients, and beneficence pertains to acting in the best interest of the patient, neither directly addresses the right of patients to govern their own bodies as autonomy does. Scope of practice involves the boundaries within which healthcare professionals operate but does not define patient rights in the same way that autonomy does. Understanding autonomy is crucial for effective communication and ethical practice in primary care.

3. What is meant by circadian rhythm?

- A. A type of exercise regimen
- B. Physiological phenomena that occur at approximately 24-hour intervals**
- C. A mental health condition
- D. Method of patient assessment

Circadian rhythm refers to physiological phenomena that occur at approximately 24-hour intervals, which are driven by internal biological clocks and can be influenced by external cues like light and temperature. This rhythmic cycle governs various bodily functions, including sleep-wake cycles, hormone release, eating habits, and other essential physiological processes. The concept is crucial in understanding how these cycles can affect overall health and well-being. For example, disruptions in circadian rhythms, such as those caused by shift work, travel across time zones, or irregular sleep patterns, can lead to sleep disorders, metabolic issues, and a decline in mental health. The other options do not accurately define circadian rhythms: exercise regimens are unrelated to the biological processes that govern natural rhythms; mental health conditions arise from various psychological factors rather than being a natural cycle; and methods of patient assessment pertain to evaluation techniques, not biological patterns. Thus, recognizing the significance of circadian rhythms is essential for maintaining a healthy lifestyle and ensuring proper physiological functioning.

4. In the Kubler-Ross model, which stage represents a phase of readiness to move on?

- A. Bargaining
- B. Denial
- C. Depression
- D. Acceptance**

The Kubler-Ross model, which outlines the stages of grief and loss, includes acceptance as a critical phase where individuals come to terms with their situation and exhibit a readiness to move forward. This stage indicates that the person has processed their feelings of loss and is able to embrace life again, integrating the changes and losses into their life. Acceptance does not necessarily mean that the individual is "okay" with the loss, but rather that they have found a way to acknowledge the reality of the situation and are open to new experiences or perspectives that come after this profound change. This phase can often be characterized by a sense of peace and the ability to move forward constructively.

5. What is the term used to describe a set of hours when a night shift worker can reliably expect to rest without interruption?

- A. Anchor time**
- B. Critical Incident**
- C. Demobilization**
- D. CISM**

The term "anchor time" is used to describe a specific period during which night shift workers can expect to have uninterrupted rest. This is crucial for their well-being and performance, as it allows them to establish a consistent sleep pattern that is essential for recovery from night shifts. Regular and uninterrupted sleep during this anchor time can help mitigate the adverse effects associated with shift work, such as fatigue, mood disturbances, and cognitive impairment. In contrast, the other terms—critical incident, demobilization, and CISM (Critical Incident Stress Management)—do not refer to designated rest periods. A critical incident typically relates to a traumatic event that may require special attention or psychological support, while demobilization refers to the process of safely transitioning individuals out from a high-stress environment. CISM is specifically a supportive measure for those involved in critical incidents, and it does not pertain to sleep or rest schedules at all. This clarity helps underline the significance of anchor time for night shift workers in achieving better health outcomes.

6. How often should the effectiveness of the medication be documented?

- A. Once a week**
- B. Immediately after administration**
- C. Only when the patient is discharged**
- D. After 30 minutes of observation**

Documenting the effectiveness of medication immediately after administration is critical for several reasons. First, it ensures a timely and accurate record of the patient's response to the medication, which is crucial for ongoing patient care. This immediate documentation provides healthcare providers with the most current information regarding the patient's condition and allows for quick adjustments to treatment if necessary. Additionally, documenting the effectiveness right after administration helps maintain an up-to-date medical record, which is important for continuity of care and for any future treatments. By recording observations while they are fresh, the healthcare provider can note any immediate side effects or reactions, which can inform future medication decisions. In contrast, other timeframes for documentation, such as weekly or at discharge, would not capture the immediate effects of the medication, potentially leading to delays in appropriate interventions. Observing and documenting after a specific time, like 30 minutes, may also be too late to address any immediate adverse reactions or to adjust further medication if necessary. Thus, the immediate documentation serves as a crucial part of monitoring and managing a patient's response to treatment.

7. What is the proper technique for hand washing?

- A. Just wetting hands before a procedure
- B. Lather with shampoo, rinse, and dry
- C. Lather with soap, scrub for at least 15 seconds, rinse under running water, and dry on a clean paper towel**
- D. Using an antibacterial gel only

The proper technique for hand washing is to lather with soap, scrub for at least 15 seconds, rinse under running water, and dry on a clean paper towel. This process is considered the most effective way to remove dirt, bacteria, and viruses from the hands. The use of soap helps to break down oils and dirt, making it easier to wash them away. Scrubbing for at least 15 seconds ensures that all surfaces of the hands, including between the fingers and under the nails, are thoroughly cleaned. Rinsing under running water helps to effectively wash away the remnants of soap and any loosened contaminants. Finally, drying on a clean paper towel is important for removing any remaining pathogens, as wet hands can transfer bacteria more easily. This method follows established guidelines for infection control and is crucial in maintaining hand hygiene, especially in healthcare settings.

8. Which drug is commonly used to treat anaphylaxis?

- A. Atropine
- B. Epinephrine**
- C. Aspirin
- D. Ibuprofen

Epinephrine is the first-line treatment for anaphylaxis due to its ability to rapidly reverse the severe and potentially life-threatening symptoms associated with this allergic reaction. When administered, epinephrine works by causing vasoconstriction, which increases blood pressure, and bronchodilation, which alleviates respiratory distress by relaxing the airways. It also reduces swelling and hives and improves cardiac output. The quick onset of action makes it essential in emergency scenarios where anaphylaxis occurs. Other medications listed, such as atropine, aspirin, and ibuprofen, do not provide the same immediate and life-saving effects in the context of anaphylaxis. Atropine primarily affects heart rate and is not indicated for allergic reactions. Aspirin and ibuprofen are anti-inflammatory and analgesic medications that can help with mild to moderate pain and inflammation, but they do not address the acute reactions seen in anaphylaxis. Therefore, epinephrine is the only suitable choice for effectively managing this severe allergic reaction.

9. Which of the following is an example of a physical stressor?

- A. A disagreement with a colleague**
- B. Poverty and financial issues**
- C. Excessive exercise without proper rest**
- D. Receiving negative feedback**

Physical stressors are factors that can directly affect the body's physical state and lead to physiological responses. Excessive exercise without proper rest is a prime example of a physical stressor because it can lead to fatigue, overuse injuries, muscular strain, and even impact cardiovascular health. When the body is pushed beyond its limits without adequate recovery, it can cause hormonal changes, increased heart rate, and muscle tension, all of which are signs of physical stress. In contrast, the other options pertain to psychological or social stressors. A disagreement with a colleague, poverty and financial issues, and receiving negative feedback can all lead to emotional or mental stress but do not directly impact the physical state of the body in the same way that excessive exercise does. Thus, the correct answer highlights a scenario where the physical demands placed on the body can lead to stress and adverse health effects.

10. How long should the primary assessment typically take?

- A. 5 minutes if the patient is stable**
- B. More than 2 minutes to ensure thoroughness**
- C. Less than one minute unless life-saving measures are needed**
- D. Approximately 30 seconds without interruptions**

The primary assessment is a critical component of patient evaluation in emergency care, designed to quickly identify any life-threatening conditions. The correct option indicates that the primary assessment should typically take less than one minute unless there are immediate life-saving measures that need to be taken. This timeframe is essential because it allows the paramedic to rapidly triage and prioritize interventions based on the most critical threats to the patient's life. In emergency situations, time is of the essence. A swift assessment helps to quickly identify issues such as airway obstructions, severe bleeding, and altered levels of consciousness, all of which can rapidly deteriorate a patient's condition if not addressed immediately. The emphasis is on a rapid yet thorough evaluation to ensure that any necessary interventions can be initiated right away without delay, as prolonged assessment could lead to worse outcomes for the patient. While thoroughness is important, especially in less critical patients, a quick primary assessment allows for the timely allocation of resources and can be complemented later by more detailed secondary assessments once the immediate dangers are managed. The focus should always remain on critical findings that require urgent attention, thus reinforcing the need for a brisk initial evaluation.