

# North Carolina EMT-Basic (EMT-B) State 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. When is an advanced airway strictly necessary in a cardiac arrest situation?**
  - A. When there is an obstruction**
  - B. When breaths are shallow**
  - C. When a patient requires medication administration**
  - D. When a patient cannot be adequately ventilated using a bag-mask device**
  
- 2. What is the correct procedure for handling a suspected spinal injury?**
  - A. Encouraging the patient to walk slowly**
  - B. Stabilizing the head and neck, avoiding movement**
  - C. Applying ice immediately**
  - D. Transporting the patient without stabilization**
  
- 3. What is the recommended CPR compression rate for infants from 1 month through puberty onset?**
  - A. 60-80 per minute**
  - B. 80-100 per minute**
  - C. 100-120 per minute**
  - D. 120-140 per minute**
  
- 4. What would be a priority intervention for a patient with signs of traumatic pneumothorax?**
  - A. Administering oral medications**
  - B. Providing supplemental oxygen**
  - C. Rapid transport to a hospital**
  - D. Performing a pending resuscitation**
  
- 5. What is a primary reason for utilizing a nasopharyngeal airway?**
  - A. To provide supplemental oxygen**
  - B. To maintain an open airway**
  - C. To enhance breathing techniques**
  - D. To clear secretions from the airway**

- 6. What is the medical term for air forming in the soft tissue around the larynx or trachea?**
- A. Subcutaneous emphysema**
  - B. Pulmonary edema**
  - C. Pleural effusion**
  - D. Asthma**
- 7. What vital information is typically found on an EMS run sheet?**
- A. Only patient demographics**
  - B. Assessment findings and vital signs only**
  - C. Patient demographics, assessment findings, vital signs, interventions, and transport information**
  - D. Transport information and weather conditions**
- 8. What are the main sections of the Incident Command System (ICS)?**
- A. Safety, Operations, Logistics, and Control**
  - B. Operations, Planning, Logistics, and Finance**
  - C. Assessment, Planning, Implementation, and Review**
  - D. Research, Operations, Management, and Support**
- 9. What is the significance of identifying whether trauma is blunt or penetrating?**
- A. Determines the necessity for hospitalization**
  - B. Impacts the management and treatment approach**
  - C. Affects patient psychological assessment**
  - D. Indicates the age of the injury**
- 10. Which of the following is the primary purpose of the EMS system?**
- A. To transport patients**
  - B. To provide public health education**
  - C. To assess and treat medical emergencies**
  - D. To conduct medical research**

## Answers

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

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## **Explanations**

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**1. When is an advanced airway strictly necessary in a cardiac arrest situation?**

- A. When there is an obstruction**
- B. When breaths are shallow**
- C. When a patient requires medication administration**
- D. When a patient cannot be adequately ventilated using a bag-mask device**

In a cardiac arrest situation, the need for an advanced airway is primarily determined by the ability to provide effective ventilation. When a patient cannot be adequately ventilated using a bag-mask device, it indicates that the basic airway techniques are insufficient to deliver oxygen to the lungs. This inadequacy may arise from various factors, such as facial injuries, obesity, or poor airway anatomy that prevents a proper seal or sufficient air delivery. In this context, an advanced airway—like an endotracheal tube or supraglottic airway device—provides a more controlled and secure means to ensure ventilation. It allows for direct access to the airway, bypasses any obstructions that might be present at the level of the mouth or pharynx, and can improve the efficacy of positive pressure ventilation when the bag-mask technique fails. While obstructions, shallow breaths, and the need for medication administration are indeed significant aspects to consider in the context of patient care, the critical factor that necessitates the placement of an advanced airway in a cardiac arrest scenario is the inability to ventilate adequately with basic techniques. This capacity becomes essential to maintain oxygenation and enhance the chances of survival and neurological outcomes in patients experiencing cardiac arrest.

**2. What is the correct procedure for handling a suspected spinal injury?**

- A. Encouraging the patient to walk slowly**
- B. Stabilizing the head and neck, avoiding movement**
- C. Applying ice immediately**
- D. Transporting the patient without stabilization**

Stabilizing the head and neck while avoiding movement is crucial in handling a suspected spinal injury. This approach minimizes the risk of exacerbating potential spinal cord damage, which could lead to serious, permanent disability or paralysis. When a spinal injury is suspected, any movement of the head, neck, or spine can cause further injury, as the bones or tissue may already be compromised. Immediately stabilizing the patient's head and neck with proper techniques, such as using one's hands to prevent any motion, is essential. In many cases, EMS personnel will also use a cervical collar and long spine board for additional stabilization during transportation. The other choices pose risks; encouraging a patient to walk after a suspected spinal injury can cause significant harm. Applying ice might provide some pain relief in other injuries, but it is not recommended as a first action in suspected spinal trauma, as it does not address the critical need for stabilization. Transporting without stabilization would also unnecessarily increase the risk of worsening the injury.

**3. What is the recommended CPR compression rate for infants from 1 month through puberty onset?**

- A. 60-80 per minute**
- B. 80-100 per minute**
- C. 100-120 per minute**
- D. 120-140 per minute**

The recommended CPR compression rate for infants from 1 month through puberty onset is 100-120 compressions per minute. This range has been established based on research indicating that a higher compression rate is more effective in maintaining blood circulation during cardiac arrest. The target of 100-120 compressions per minute helps to increase the chances of positive outcomes by ensuring that blood is being adequately circulated to vital organs. In this age group, the compressions should be delivered at a consistent and brisk pace, allowing for effective heart rate imitation and aiding in the prevention of brain damage due to lack of oxygen. Additionally, this rate aligns with current guidelines from organizations like the American Heart Association, ensuring that the CPR performed is both effective and up to date with best practices. Balancing quality and rate during CPR is crucial, and adhering to this recommended range is key in optimizing the chances of survival for infants in cardiac arrest situations.

**4. What would be a priority intervention for a patient with signs of traumatic pneumothorax?**

- A. Administering oral medications**
- B. Providing supplemental oxygen**
- C. Rapid transport to a hospital**
- D. Performing a pending resuscitation**

For a patient exhibiting signs of traumatic pneumothorax, providing supplemental oxygen is essential due to the impaired gas exchange that occurs when air enters the pleural space, leading to reduced lung capacity and oxygenation. Administering supplemental oxygen helps to ensure that the patient receives an adequate supply of oxygen despite their compromised pulmonary function. This intervention is critical as it can help maintain oxygen saturation levels and support vital organ function while en route to definitive medical care. Although other options, such as rapid transport to a hospital, may seem necessary as well, they do not directly address the immediate management of the patient's reduced oxygenation resulting from the pneumothorax. In emergency scenarios, ensuring adequate oxygenation is paramount, as respiratory distress can rapidly lead to further complications. Therefore, the provision of supplemental oxygen should take precedence in the management plan for this type of injury.

**5. What is a primary reason for utilizing a nasopharyngeal airway?**

- A. To provide supplemental oxygen**
- B. To maintain an open airway**
- C. To enhance breathing techniques**
- D. To clear secretions from the airway**

The primary reason for utilizing a nasopharyngeal airway is to maintain an open airway. This device is designed for use in patients who are unable to maintain their own airway due to conditions like altered mental status, airway obstruction, or certain medical emergencies. By inserting the nasopharyngeal airway, it helps to prevent the tongue from falling back and occluding the airway, which is a common concern in unconscious or semi-conscious patients. This airway adjunct is particularly advantageous because it can be inserted without requiring the patient's mouth to be open, making it a suitable option for those who may have a jaw injury or who are unable to cooperate with standard airway maneuvers. It allows for easier ventilation and can improve oxygenation by ensuring that air can flow freely into the trachea, which is critical for effective respiratory function. Other options, while related to airway management and oxygenation, do not address the primary purpose of the nasopharyngeal airway as clearly as maintaining airway patency does. For example, providing supplemental oxygen is a different intervention that involves delivering oxygen directly to a patient but does not inherently address airway obstructions. Similarly, enhancing breathing techniques and clearing secretions are outcomes of successful airway management rather than the fundamental purpose of a

**6. What is the medical term for air forming in the soft tissue around the larynx or trachea?**

- A. Subcutaneous emphysema**
- B. Pulmonary edema**
- C. Pleural effusion**
- D. Asthma**

The medical term for air that accumulates in the soft tissue around the larynx or trachea is subcutaneous emphysema. This condition occurs when air leaks from the trachea or lungs into the surrounding soft tissues, which can happen due to trauma, rupture of the airway, or certain medical procedures. Subcutaneous emphysema can lead to a noticeable swelling under the skin and may be associated with a crackling sensation upon palpation, often referred to as crepitus. In contrast, pulmonary edema involves fluid accumulation in the lungs, typically as a result of heart failure or other underlying conditions, and does not relate to air in soft tissue. Pleural effusion refers to the buildup of fluid in the pleural space surrounding the lungs, again not involving air in soft tissue. Asthma is a chronic respiratory condition characterized by airway inflammation and constriction, leading to difficulty breathing, but does not involve subcutaneous air formation. Understanding these distinctions is crucial for identifying and managing different respiratory and airway-related emergencies.

**7. What vital information is typically found on an EMS run sheet?**

- A. Only patient demographics**
- B. Assessment findings and vital signs only**
- C. Patient demographics, assessment findings, vital signs, interventions, and transport information**
- D. Transport information and weather conditions**

The correct choice includes a comprehensive array of vital information that is essential for documenting the care provided to the patient during an EMS call. An EMS run sheet is designed to capture a complete record of the patient encounter and care process. This typically includes: - Patient demographics, which provide essential identifying information about the patient, such as name, age, gender, and medical history. - Assessment findings, which detail the observations and evaluations made by the EMT during the patient assessment, allowing for an understanding of the patient's condition at the time of care. - Vital signs, which are crucial indicators of a patient's physiological state and guide interventions. These often include measurements like heart rate, blood pressure, respiratory rate, and temperature. - Interventions carried out by the EMT, documenting the treatments or procedures performed, such as administering medications, providing oxygen, or other necessary emergency treatments. - Transport information outlines how and where the patient is being transported, including the destination hospital, mode of transport, and any changes in patient status during the transport. All these elements combined help ensure continuity of care, facilitate information transfer to receiving health care facilities, and provide legal documentation of the care provided, which is why this answer is the most complete and accurate in reflecting what is typically found on an

**8. What are the main sections of the Incident Command System (ICS)?**

- A. Safety, Operations, Logistics, and Control**
- B. Operations, Planning, Logistics, and Finance**
- C. Assessment, Planning, Implementation, and Review**
- D. Research, Operations, Management, and Support**

The main sections of the Incident Command System (ICS) are Operations, Planning, Logistics, and Finance. This structured approach is designed to facilitate effective incident management by providing a clear framework for coordination during incidents. Operations focuses on the tactical aspects of managing incidents, including direct engagement with the incident and resource deployment. The Planning section is responsible for collecting and analyzing information, establishing objectives, and developing strategies to address the incident. Logistics supports all incident-related activities by providing resources, personnel, and equipment needed to implement the plan effectively. The Finance section manages the costs associated with the incident response, ensuring that resources are allocated and utilized efficiently. This structure allows organizations to maintain clear communication, establish roles and responsibilities, and effectively manage resources during emergency situations, promoting a cohesive and efficient response.

**9. What is the significance of identifying whether trauma is blunt or penetrating?**

- A. Determines the necessity for hospitalization**
- B. Impacts the management and treatment approach**
- C. Affects patient psychological assessment**
- D. Indicates the age of the injury**

Identifying whether trauma is blunt or penetrating is crucial because it significantly impacts the management and treatment approach for the patient. Blunt trauma typically involves injuries that occur from forces such as falls, collisions, or blows, often affecting multiple systems and may lead to internal injuries without visible external wounds. On the other hand, penetrating trauma involves objects that pierce the skin and can result in specific wound pathways that damage underlying structures and organs. This distinction guides the healthcare provider in determining the necessary interventions, such as whether immediate surgical intervention is required for penetrating trauma or if careful monitoring and imaging might be more appropriate for blunt trauma. It also influences decisions about emergency procedures, such as intubation or using chest decompression, depending on the injury type. Thus, the classification of trauma plays a fundamental role in ensuring that the patient receives the most effective and appropriate care based on their specific injuries.

**10. Which of the following is the primary purpose of the EMS system?**

- A. To transport patients**
- B. To provide public health education**
- C. To assess and treat medical emergencies**
- D. To conduct medical research**

The primary purpose of the EMS (Emergency Medical Services) system is to assess and treat medical emergencies. This encompasses a wide range of responsibilities that emergency medical personnel undertake to ensure the safety and well-being of patients in urgent situations. When a medical emergency occurs, the immediate aim of EMS is to provide rapid assessment and appropriate treatment—this can include basic life support, advanced life support, and other critical interventions before and during transport to a healthcare facility. While transporting patients is certainly a key component of the EMS protocol, it serves as a means to an end; the main goal is to stabilize and treat patients while providing timely care. Similarly, public health education is important but is often a secondary function rather than a primary role of the EMS system. Conducting medical research is also crucial for the advancement of medical practices, yet it does not fall within the primary operational focus of frontline EMS services. The central role remains the urgent assessment and treatment of medical emergencies, ensuring that patients receive the care they need as quickly and effectively as possible.

## 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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://ncemtstate.examzify.com>**

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

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