

# NREMT Cardiology & Resuscitation Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

**This is a sample study guide. To access the full version with hundreds of questions,**

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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. Don't worry about getting everything right, 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, and take breaks to retain information better.**

## 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.**

## 7. Use Other Tools

**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!**

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## **Questions**

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- 1. Why should aspirin be given to a patient suspected of cardiac issues?**
  - A. To dissolve a ruptured coronary plaque**
  - B. To reduce clotting at the site of a ruptured coronary plaque**
  - C. To provide analgesic effects at the site of a ruptured coronary plaque**
  - D. To dilate coronary arteries at the site of the ruptured plaque**
- 2. What is the depth of chest compressions recommended for adults during CPR?**
  - A. 1 inch (2.5 cm)**
  - B. 1.5 inches (3.75 cm)**
  - C. At least 2 inches (5 cm)**
  - D. 2.5 inches (6.25 cm)**
- 3. For patients experiencing an asthma attack, what is the primary medication usually administered?**
  - A. antibiotics.**
  - B. bronchodilators.**
  - C. anti-inflammatories.**
  - D. diuretics.**
- 4. What is the purpose of the recovery position in unconscious patients?**
  - A. To allow the patient to breathe more easily**
  - B. To prevent choking**
  - C. To monitor vital signs effectively**
  - D. To prepare for transportation**
- 5. An 11-year-old male loses consciousness during soccer play. He had experienced dizziness and chest pain. What should be your initial action?**
  - A. Administer oxygen by nasal cannula**
  - B. Place him in a position of comfort**
  - C. Transport him fully immobilized**
  - D. Monitor his vital signs closely**

**6. If a resuscitated patient states they do not recall the event, what should you do next?**

- A. Disconnect the AED.**
- B. Document the patient's response.**
- C. Continue your treatment.**
- D. Assess neurological function.**

**7. Which of the following is a sign of effective compression during CPR?**

- A. Visible rise and fall of the patient's chest**
- B. Rapid heart rate on the ECG**
- C. Abnormal breath sounds**
- D. Consistent rhythm of compressions**

**8. What is the primary cause of cardiac arrest for a patient struck by lightning?**

- A. Asystole**
- B. Hypoxia**
- C. Depression of body functions**
- D. Obstruction of coronary circulation**

**9. What is a common cause of cardiac arrest in children?**

- A. Heart disease**
- B. Respiratory failure or airway obstruction**
- C. Cardiac tamponade**
- D. Pneumonia**

**10. An 84-year-old male complains of right-sided weakness and has a history of hypertension. What should you do?**

- A. Administer oxygen by non-rebreather mask**
- B. Administer oxygen by nasal cannula**
- C. Assist with the administration of his insulin**
- D. Notify the receiving hospital of your findings**

## **Answers**

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

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## **Explanations**

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- 1. Why should aspirin be given to a patient suspected of cardiac issues?**
  - A. To dissolve a ruptured coronary plaque**
  - B. To reduce clotting at the site of a ruptured coronary plaque**
  - C. To provide analgesic effects at the site of a ruptured coronary plaque**
  - D. To dilate coronary arteries at the site of the ruptured plaque**

Aspirin is administered to patients suspected of experiencing cardiac issues primarily because it acts as an antiplatelet agent. This means that it helps to inhibit the aggregation of platelets, thereby reducing clot formation in the blood vessels. When there is a rupture of a coronary plaque, the body's natural response is to form a clot at that site. If platelets aggregate excessively, it can lead to the formation of a thrombus (blood clot) that can further obstruct blood flow to the heart muscle, resulting in a myocardial infarction (heart attack). By taking aspirin, the risk of this excessive clotting is decreased, which can help to preserve coronary circulation and potentially save myocardial tissue. This therapeutic intervention is crucial during acute coronary syndromes or suspected heart attacks, as it can reduce the extent of damage to the heart and improve outcomes for the patient. The other choices focus on mechanisms that either don't align with the action of aspirin or are not its primary function. Thus, the rationale for using aspirin in this context centers on its role in reducing the risk of clotting at the site of a ruptured coronary plaque.

- 2. What is the depth of chest compressions recommended for adults during CPR?**
  - A. 1 inch (2.5 cm)**
  - B. 1.5 inches (3.75 cm)**
  - C. At least 2 inches (5 cm)**
  - D. 2.5 inches (6.25 cm)**

The recommended depth of chest compressions for adults during CPR is at least 2 inches (5 cm). This guideline is based on extensive research showing that deeper compressions have a greater chance of generating sufficient blood flow to vital organs during cardiac arrest. Compressing the chest to this depth helps ensure that the heart is effectively compressed, creating the pressure needed to circulate blood, which is crucial for maintaining perfusion to the brain and other vital organs. Compressions that are deep enough help facilitate adequate oxygen delivery until advanced medical care can be provided. Furthermore, this recommendation is aligned with guidelines from major health organizations, such as the American Heart Association, which emphasizes the importance of both the depth and the rate of compressions to maximize the effectiveness of CPR.

**3. For patients experiencing an asthma attack, what is the primary medication usually administered?**

- A. antibiotics.**
- B. bronchodilators.**
- C. anti-inflammatories.**
- D. diuretics.**

During an asthma attack, the primary goal of treatment is to relieve bronchospasm and improve airflow. Bronchodilators are specifically designed to open the airways by relaxing the muscles surrounding them, which is critical during an acute asthma episode. These medications, such as albuterol, quickly act on the beta-2 receptors in the bronchial smooth muscle, leading to dilation of the airways and an increase in airflow. While antibiotics, anti-inflammatories, and diuretics play important roles in different medical scenarios, they are not the first-line treatment for an acute asthma attack. Antibiotics are used for bacterial infections, anti-inflammatories might be utilized for long-term control of asthma, and diuretics are typically associated with conditions like heart failure rather than respiratory issues. In an emergency setting for asthma, the immediate administration of bronchodilators is critical for patient stabilization and improvement of respiratory function.

**4. What is the purpose of the recovery position in unconscious patients?**

- A. To allow the patient to breathe more easily**
- B. To prevent choking**
- C. To monitor vital signs effectively**
- D. To prepare for transportation**

The recovery position is primarily used to prevent choking in unconscious patients. When a person is unconscious but still breathing, placing them in the recovery position ensures that the airway remains open and any fluids, such as saliva or vomit, can drain from the mouth. This position typically involves the patient lying on their side, which minimizes the risk of aspiration and allows any secretions to exit the mouth rather than being inhaled into the lungs. Maintaining a clear airway is crucial, as choking on vomit or other fluids can lead to serious complications, including respiratory distress or failure. While other answers may touch on relevant aspects of patient care, such as facilitating breathing or the ability to monitor vital signs and prepare for transportation, the most critical function of the recovery position is its role in protecting the airway and preventing aspiration.

**5. An 11-year-old male loses consciousness during soccer play. He had experienced dizziness and chest pain. What should be your initial action?**

- A. Administer oxygen by nasal cannula**
- B. Place him in a position of comfort**
- C. Transport him fully immobilized**
- D. Monitor his vital signs closely**

In a scenario where an 11-year-old male loses consciousness during physical activity and has experienced symptoms like dizziness and chest pain, the initial action should focus on ensuring his safety and comfort. Placing him in a position of comfort allows for the evaluation of his condition while preventing potential injury if he remains in a compromised posture. This position can help facilitate breathing and circulation, which is crucial for a patient who has lost consciousness. It provides a better anatomical alignment of the airway, especially when there is a risk of vomit or airway obstruction due to loss of responsiveness. Administering oxygen might be necessary later, but it is not the immediate priority because ensuring he is stable and safe takes precedence in the management of an unconscious individual. Similarly, transporting him fully immobilized could be appropriate, but it should only be done if there is suspicion of a spinal injury, which is not indicated in this case from the provided symptoms. Monitoring vital signs is essential but after ensuring the patient's comfort and establishing an airway, as vital signs can be reassessed continuously while monitoring overall responsiveness.

**6. If a resuscitated patient states they do not recall the event, what should you do next?**

- A. Disconnect the AED.**
- B. Document the patient's response.**
- C. Continue your treatment.**
- D. Assess neurological function.**

The appropriate action after a resuscitated patient states they do not recall the event is to continue your treatment. In the context of post-resuscitation care, it is important to ensure that the patient is monitored closely for any potential complications or changes in their condition. Continuing treatment allows for the assessment of vital signs and neurological function, which are crucial for determining the patient's stability and ongoing needs. Patients who do not recall the event may be experiencing a variety of neurological responses, and their condition could change rapidly. Therefore, maintaining a proactive approach in treatment is essential to address any potential issues that may arise. By keeping up with treatment protocols, you can provide necessary interventions that could be life-saving. While documenting the patient's response, assessing neurological function, and disconnecting the AED may be relevant tasks in the overall patient care process, they should not take precedence over the immediate need to stabilize and monitor the patient following resuscitation. Focusing on continuing treatment ensures that all bases are covered in managing the patient's health effectively.

**7. Which of the following is a sign of effective compression during CPR?**

- A. Visible rise and fall of the patient's chest**
- B. Rapid heart rate on the ECG**
- C. Abnormal breath sounds**
- D. Consistent rhythm of compressions**

A visible rise and fall of the patient's chest is a sign of effective compression during CPR because it indicates that adequate ventilation is occurring. When chest compressions are performed correctly, they generate sufficient pressure to propel blood through the circulatory system while also allowing air to flow in and out of the lungs. This physical movement of the chest is a clear indicator that the compressions are significant enough to create a change in the thoracic pressure, which is essential for effective cardiopulmonary resuscitation. The other options do not directly indicate effective compressions. A rapid heart rate on the ECG might occur, but it doesn't necessarily reflect the efficacy of the compressions. Abnormal breath sounds might indicate complications such as aspiration or improper ventilation but do not provide evidence regarding the chest compressions themselves. A consistent rhythm of compressions is important for maintaining quality CPR, but it doesn't confirm that the compressions are effective in achieving visible chest rise. Therefore, the visible rise and fall of the chest serves as the most direct and observable sign of effective compression during CPR.

**8. What is the primary cause of cardiac arrest for a patient struck by lightning?**

- A. Asystole**
- B. Hypoxia**
- C. Depression of body functions**
- D. Obstruction of coronary circulation**

The primary cause of cardiac arrest in a patient struck by lightning is often asystole. When a person is struck by lightning, the electric current can interfere with the heart's electrical system, leading to a disruption in the normal rhythm. In many cases, this disruption results in asystole, which is a state where there is no electrical activity in the heart, leading to a cessation of effective heart contractions and, subsequently, blood circulation. Asystole suggests that the heart has completely stopped beating, which is a critical emergency requiring immediate resuscitation efforts, such as CPR and advanced cardiac life support. The electric shock from the lightning not only affects the heart but can additionally cause serious injuries to other organ systems and lead to various complications. Other potential issues, like hypoxia, depression of body functions, or obstruction of coronary circulation, typically arise secondary to asystole or the effects of the electric shock, rather than being the primary immediate cause. Thus, asystole is recognized as the most direct and evident immediate consequence of a lightning strike that leads to cardiac arrest.

## 9. What is a common cause of cardiac arrest in children?

- A. Heart disease
- B. Respiratory failure or airway obstruction**
- C. Cardiac tamponade
- D. Pneumonia

Respiratory failure or airway obstruction is indeed a common cause of cardiac arrest in children. In pediatric populations, cardiac arrest often arises from respiratory issues rather than primary cardiac problems, which are more prevalent in adults. Children have smaller airways that can become easily obstructed, and their respiratory systems can fail quickly due to various factors, including illness, trauma, or choking. When a child's airway is compromised or they experience significant respiratory failure, the lack of oxygen leads to hypoxia, which can quickly result in cardiac arrest. The body's compensatory mechanisms may initially maintain circulation, but if the oxygen deprivation continues, the heart will eventually stop beating. This underscores the importance of early recognition and intervention in cases of respiratory distress in children to prevent progression to cardiac arrest. While heart disease, cardiac tamponade, and pneumonia can also lead to cardiac arrest, they are less common causes in the pediatric population. Cardiac conditions are relatively rare in young children, making respiratory complications a more significant concern.

## 10. An 84-year-old male complains of right-sided weakness and has a history of hypertension. What should you do?

- A. Administer oxygen by non-rebreather mask
- B. Administer oxygen by nasal cannula
- C. Assist with the administration of his insulin
- D. Notify the receiving hospital of your findings**

In cases of sudden onset weakness, especially when accompanied by a history of hypertension, there is a significant concern for a possible stroke or transient ischemic attack (TIA). The rapid assessment and management in such situations are critical. Notifying the receiving hospital of your findings, including the patient's age, symptoms, and medical history, is essential for several reasons. First, it allows the hospital to prepare for the patient's arrival. Advanced stroke care is time-sensitive, and informing the hospital can initiate protocols such as a stroke team alert. This timely notification can lead to rapid diagnostic imaging and treatment, such as the administration of thrombolytics, if appropriate. Furthermore, hospitals often have specific guidelines they follow when dealing with potential stroke patients, including protocols for triage and intervention. By communicating the patient's condition early, you can facilitate a smoother transition to definitive care, which is crucial for the patient's outcomes. In this scenario, while oxygen administration may be necessary if the patient is hypoxic, it does not directly address the underlying condition or prepare for stroke management. Assisting with insulin would be irrelevant unless there were signs of hypoglycemia, which isn't indicated here. Thus, focusing on notifying the receiving facility ensures the patient receives timely and appropriate care for their acute condition.

# 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://nremtcardiologyresuscitation.examzify.com>**

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

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