

PAEASY EMERGENCY MEDICINE PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED 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. 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. The four types of urinary incontinence are total, stress, urge, and overflow. What term completes the sentence?**
 - A. Incontinence
 - B. Dysuria
 - C. Polyuria
 - D. Nocturia
- 2. Which radiographic sign is associated with pancreatitis on X-ray, as mentioned in the material?**
 - A. Sentinel loop sign and colon cutoff sign
 - B. Normal findings
 - C. Air in the biliary tree
 - D. Elevated chest sign
- 3. Which organism is commonly associated with contamination of eggs, dairy products, or poultry?**
 - A. Salmonella
 - B. Shigella
 - C. Campylobacter jejuni
 - D. Escherichia coli
- 4. A patient presents with immediate pain and paresthesias after a sting, a positive tap test, tachycardia, nausea/vomiting, roving eye movements, muscle spasms, vision impairment, and dysphagia. Dx and treatment?**
 - A. Scorpion venom
 - B. Black Widow bite
 - C. Lice infestation
 - D. Chiggers
- 5. Which criterion indicates the use of sodium bicarbonate therapy in metabolic acidosis?**
 - A. Fluids and oxygen only
 - B. Sodium bicarbonate therapy
 - C. Oxygen only
 - D. No intervention unless shock

- 6. Which treatment option is indicated for epiglottitis in an emergency setting?**
- A. Humidified air
 - B. Budesonide nebulizer
 - C. Albuterol nebulizer
 - D. Racemic epinephrine nebulizer
- 7. Initial management of suspected cholera focuses on what?**
- A. Rehydration
 - B. Antibiotics
 - C. Anti-diarrheal therapy
 - D. Vaccination
- 8. Stones less than how many millimeters have about 90% chance of passing spontaneously?**
- A. 2 mm
 - B. 4 mm
 - C. 6 mm
 - D. 8 mm
- 9. Which illness presents with abrupt onset of fever, chills, headache, myalgia, malaise, sore throat, and bilateral tender cervical lymph nodes?**
- A. Allergic rhinitis
 - B. Common cold
 - C. Pneumonia
 - D. Influenza
- 10. In chronic renal failure, which antihypertensive is listed as part of the recommended therapy?**
- A. ACE inhibitors
 - B. Diuretics
 - C. Nitrates
 - D. Beta blockers

Answers

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

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Explanations

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1. The four types of urinary incontinence are total, stress, urge, and overflow. What term completes the sentence?

A. Incontinence

B. Dysuria

C. Polyuria

D. Nocturia

Incontinence is the umbrella term for the condition of involuntary leakage of urine. The four listed types—total, stress, urge, and overflow—are all specific forms of this broader problem, so the word that completes the sentence is incontinence. The other terms describe different urinary issues: dysuria means painful urination, polyuria is producing unusually large volumes of urine, and nocturia is waking up at night to urinate.

2. Which radiographic sign is associated with pancreatitis on X-ray, as mentioned in the material?

A. Sentinel loop sign and colon cutoff sign

B. Normal findings

C. Air in the biliary tree

D. Elevated chest sign

In acute pancreatitis, a plain abdominal X-ray can show localized signs of ileus near the pancreas. The sentinel loop sign is a dilated loop of small bowel adjacent to the pancreas, reflecting a localized ileus from inflammatory irritation. The colon cutoff sign is gas in the transverse colon that ends abruptly at the splenic flexure due to spasm or irritation from the same inflammatory process. Seeing these signs supports pancreatitis on radiographs, even though they're not highly sensitive. Other findings like air in the biliary tree or an undefined elevated chest sign are not typical radiographic indicators of pancreatitis, and normal findings wouldn't explain the inflammatory process.

3. Which organism is commonly associated with contamination of eggs, dairy products, or poultry?

A. Salmonella

B. Shigella

C. Campylobacter jejuni

D. Escherichia coli

This question tests knowledge of which foodborne pathogen is classically linked to common animal-derived foods. Salmonella enterica is the organism most often associated with contamination of eggs, dairy products, and poultry. It can reach eggs through contamination of the shell from the hen's gut or during handling, and dairy can be contaminated if milk is not pasteurized or if there is cross-contamination. Infection typically presents as gastroenteritis with fever, abdominal cramps, and diarrhea after ingesting contaminated food. Prevention centers on proper cooking and handling: thoroughly cooking eggs and poultry, pasteurizing dairy, and avoiding cross-contamination between raw and ready-to-eat foods. While Campylobacter is also common in poultry and some dairy, Salmonella is the classic association for eggs, dairy, and poultry.

4. A patient presents with immediate pain and paresthesias after a sting, a positive tap test, tachycardia, nausea/vomiting, roving eye movements, muscle spasms, vision impairment, and dysphagia. Dx and treatment?

A. Scorpion venom

B. Black Widow bite

C. Lice infestation

D. Chiggers

This presentation reflects a neurotoxic envenomation from a scorpion sting, producing a rapid autonomic storm and neuromuscular hyperexcitability. Scorpion venom alters ion channel function in nerves and muscles, leading to widespread symptoms beyond the local sting site. The patient's immediate pain and paresthesias, a positive tapping sign over a nerve, tachycardia, nausea/vomiting, and cranial/bulbar signs such as roving eye movements, muscle spasms, vision impairment, and dysphagia all fit this pattern. These features point to systemic venom effects rather than a simple local reaction or a non-neurotoxic arthropod bite. Treatment centers on removing the venom's effects with a specific antivenom, which can blunt the autonomic and neuromuscular symptoms. Supportive care is essential: ensure airway and breathing, monitor cardiovascular status, provide IV fluids, and treat pain and muscle spasms with appropriate medications such as benzodiazepines. Intensive monitoring is warranted for progression to respiratory compromise, and escalation to ICU care may be needed if symptoms are severe. Other bites such as black widow typically cause intense muscle cramping and generalized pain but less often involve cranial nerve-related signs like roving eye movements or dysphagia. Lice infestation and chiggers cause only localized itching and dermatitis, not these systemic neurotoxic features.

5. Which criterion indicates the use of sodium bicarbonate therapy in metabolic acidosis?

A. Fluids and oxygen only

B. Sodium bicarbonate therapy

C. Oxygen only

D. No intervention unless shock

In metabolic acidosis, the decision to use sodium bicarbonate hinges on the severity of the acidemia and the bicarbonate deficit. The best criterion for giving bicarbonate is the presence of significant acidemia, typically a pH around 7.1 or lower, with a very low bicarbonate level (about 8 mEq/L or less). At this level, raising the pH with bicarbonate can improve cardiac function and prevent hemodynamic collapse. Giving bicarbonate is not routinely done for mild acidosis, because it can cause volume overload, sodium overload, and increased CO₂ generation, which may worsen intracellular acidosis. In certain toxin-induced or high-anion-gap cases, bicarbonate can be particularly helpful, but the key factor remains the severe acidemia and depleted bicarbonate.

6. Which treatment option is indicated for epiglottitis in an emergency setting?

- A. Humidified air
- B. Budesonide nebulizer
- C. Albuterol nebulizer
- D. Racemic epinephrine nebulizer**

Managing epiglottitis in the emergency setting hinges on securing the airway and treating the infection, not on bronchodilators or vasoconstrictors given by inhalation. Racialized epinephrine nebulization is a treatment used for conditions with subglottic narrowing, like croup, where alpha-adrenergic vasoconstriction reduces edema in the lower airway. Epiglottitis, however, involves swelling above the glottis (supraglottic region) and carries a high risk of sudden airway obstruction. Nebulized epinephrine does not address the underlying swelling or infection and can give a false sense of improvement while delaying definitive airway management and antibiotics. In this emergency context, the priority is airway protection (often with securing the airway via endotracheal intubation in a controlled setting), intravenous broad-spectrum antibiotics to cover the likely pathogens, and systemic corticosteroids to reduce edema. Humidified air may offer comfort but does not treat the infection or airway inflammation; inhaled budesonide and albuterol target bronchospasm or lower airway edema and are not appropriate treatment for epiglottitis.

7. Initial management of suspected cholera focuses on what?

- A. Rehydration**
- B. Antibiotics
- C. Anti-diarrheal therapy
- D. Vaccination

Rapid restoration of intravascular volume is the priority in suspected cholera. The illness causes massive, watery diarrhea that quickly dehydrates and electrolyte losses, so without swift fluid replacement patients can progress to hypovolemic shock and death within hours. Rehydration, using oral rehydration solutions for those who can drink and intravenous fluids (often Ringer's lactate) for severe dehydration or inability to take fluids, directly addresses the life-threatening problem. Correcting fluids and electrolytes stabilizes circulation and improves outcomes far more immediately than any other measure. Once rehydration is underway or complete, antibiotics can be added to shorten the illness and reduce stool output, but they do not replace fluids. Anti-diarrheal therapy is generally avoided in suspected cholera because it can slow clearance of toxins and worsen the course, and vaccination serves a preventive role, not initial treatment.

8. Stones less than how many millimeters have about 90% chance of passing spontaneously?

- A. 2 mm
- B. 4 mm**
- C. 6 mm
- D. 8 mm

Stone size is the main predictor of whether a ureteral stone will pass on its own. The smaller the stone, the higher the chance of spontaneous passage. The commonly cited figure is that stones smaller than about 4 millimeters have roughly a 90% chance of passing without intervention. As stones get larger, the likelihood of spontaneous passage drops, so 6–8 mm stones are far less likely to pass and often require medical or surgical management. Therefore, the threshold for about a 90% spontaneous passage is about 4 mm.

9. Which illness presents with abrupt onset of fever, chills, headache, myalgia, malaise, sore throat, and bilateral tender cervical lymph nodes?

- A. Allergic rhinitis
- B. Common cold
- C. Pneumonia

D. Influenza

The key idea is a sudden, febrile viral illness with prominent systemic symptoms. Influenza tends to come on abruptly with high fever and chills, along with severe headache, generalized muscle aches (myalgia), malaise, and sore throat. Lymph node tenderness can occur as part of the body's response to infection, including bilateral cervical nodes. In contrast, a common cold usually starts more gradually and features milder fever or none at all, with nasal symptoms predominating. Allergic rhinitis lacks fever and systemic symptoms, presenting with sneezing, itching, and nasal congestion. Pneumonia, while it can involve fever, typically presents with more focal respiratory findings such as a productive cough, dyspnea, chest pain, and abnormal lung exam, rather than the diffuse systemic symptoms and cervical lymphadenopathy seen here.

10. In chronic renal failure, which antihypertensive is listed as part of the recommended therapy?

- A. ACE inhibitors
- B. Diuretics**
- C. Nitrates
- D. Beta blockers

In chronic kidney disease, controlling blood pressure often hinges on removing excess fluid and salt from the body. Diuretics do this by increasing urine output, which lowers extracellular fluid volume and helps reduce blood pressure. Loop diuretics are particularly useful when kidney function is reduced because they remain effective even with low GFR, while thiazides lose effectiveness as GFR falls. This makes diuretics a common staple in CKD-related hypertension management, especially for addressing edema and volume overload. Be mindful of potential electrolyte disturbances (such as low potassium or sodium) and dehydration, and monitor kidney function and fluid status. While other antihypertensives like ACE inhibitors can offer kidney-protective benefits, the option most routinely listed for CKD-related hypertension due to its volume-reducing effects is diuretics.

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:

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

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