

PLATINUM EMERGENCY MEDICAL TECHNICIAN - PARAMEDIC (EMTP) 3.3 PRACTICE TEST (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. Know when to perform a right sided 12 lead (V4R)**
 - A. For a suspected inferior MI
 - B. For a suspected anterior MI
 - C. When you suspect inferior MI to check right-sided involvement
 - D. In all MI evaluations

- 2. Which formula expresses Fahrenheit to Celsius?**
 - A. $(^{\circ}\text{F} - 32) \div 1.8 = ^{\circ}\text{C}$
 - B. $(^{\circ}\text{F} - 32) \times 1.8 = ^{\circ}\text{C}$
 - C. $(^{\circ}\text{F} + 32) \div 1.8 = ^{\circ}\text{C}$
 - D. $(^{\circ}\text{F} - 32) \div 1.8 = ^{\circ}\text{C}$

- 3. Pain from acute cholecystitis is typically worsened by which action?**
 - A. Deep inspiration
 - B. Swallowing solid food
 - C. Bending forward
 - D. Lying supine

- 4. Which parameter provides the most objective measure of oxygenation?**
 - A. Lung sounds
 - B. Mental status
 - C. Pulse oximetry reading
 - D. Skin color

- 5. Before applying supplemental oxygen, which data should be quickly obtained?**
 - A. Airway patency
 - B. All of the above
 - C. Pulse oximetry
 - D. Respiratory rate

- 6. Which statement is true regarding EMS triage regarding illness or injury perception?**
- A. The person must be in immediate danger
 - B. The person must consent to EMS
 - C. The person must be a minor
 - D. Any reasonable person would believe the person is or may be ill or injured
- 7. Which statement best describes common signs and symptoms of bacterial pneumonia?**
- A. Sore throat with no cough
 - B. A fever with chills and a dry cough
 - C. Fever and chills with a productive cough producing yellow to brown sputum
 - D. Headache only
- 8. What is the proper action when an EMS unit is in emergency mode and traveling with an escort through an intersection?**
- A. Obey all traffic laws and stop or slow down before crossing the intersection
 - B. Push through the intersection
 - C. Stop and wait for police direction
 - D. Turn off lights and siren
- 9. What is the first assessment performed on every patient?**
- A. Vital Signs Assessment
 - B. Secondary Survey
 - C. Primary Survey/Resuscitation
 - D. Triage and Dispatch
- 10. If signs of tension pneumothorax are present, what immediate action should be performed?**
- A. Immediate needle decompression or chest thoracostomy
 - B. Apply ointment and rest
 - C. Administer IV fluids only
 - D. Order X-ray first

Answers

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

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Explanations

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1. Know when to perform a right sided 12 lead (V4R)

- A. For a suspected inferior MI
- B. For a suspected anterior MI
- C. When you suspect inferior MI to check right-sided involvement**
- D. In all MI evaluations

Right-sided leads (V4R) are used specifically to check the right ventricle for involvement when an inferior myocardial infarction is suspected. Inferior MIs, often from occlusion of the right coronary artery, can extend to the right ventricle. If V4R shows ST-segment elevations, that confirms right ventricular infarction, which changes how you manage the patient (for example, you'd be more cautious with preload-reducing meds like nitrates and may prioritize fluids). This is why the test target is to perform a right-sided ECG when you suspect an inferior MI to assess right-sided involvement. It isn't routinely needed for anterior MIs, and it isn't necessary in every MI evaluation—only when inferior MI with potential RV involvement is suspected.

2. Which formula expresses Fahrenheit to Celsius?

- A. $(^{\circ}\text{F} - 32) \div 1.8 = ^{\circ}\text{C}$
- B. $(^{\circ}\text{F} - 32) \times 1.8 = ^{\circ}\text{C}$
- C. $(^{\circ}\text{F} + 32) \div 1.8 = ^{\circ}\text{C}$
- D. $(^{\circ}\text{F} - 32) \div 1.8 = ^{\circ}\text{C}$**

Converting Fahrenheit to Celsius involves removing the offset of the freezing point and then adjusting for the different degree sizes. The Fahrenheit scale sets freezing at 32°F and boiling at 212°F, while Celsius has freezing at 0°C and boiling at 100°C, so one degree on Fahrenheit is larger than one degree on Celsius by a factor of 9/5 (which is 1.8). To convert, subtract 32 from the Fahrenheit value to align with the Celsius zero point, then divide by 1.8 (or multiply by 5/9) to convert the degree size. So the correct formula is Celsius equals (Fahrenheit minus 32) divided by 1.8, which is the same as Celsius equals (Fahrenheit minus 32) times 5/9. For example, 212°F yields $(212 - 32) \div 1.8 = 100^{\circ}\text{C}$, and 32°F yields $(32 - 32) \div 1.8 = 0^{\circ}\text{C}$.

3. Pain from acute cholecystitis is typically worsened by which action?

- A. Deep inspiration**
- B. Swallowing solid food
- C. Bending forward
- D. Lying supine

Deep inspiration tends to worsen pain in acute cholecystitis because the inflamed gallbladder is irritated by diaphragmatic movement. When you take a deep breath, the diaphragm moves downward and the liver and gallbladder shift with it. This movement can stretch and press on the irritated gallbladder and surrounding peritoneum, amplifying pain. This is reflected clinically by how a deep breath can provoke RUQ pain and, in exam settings, how Murphy's sign demonstrates pain with inspiratory effort. While meals can trigger gallbladder contraction and contribute to pain in biliary disease, the acute inflammatory pain is classically aggravated by breathing in deeply.

4. Which parameter provides the most objective measure of oxygenation?

- A. Lung sounds
- B. Mental status
- C. Pulse oximetry reading**
- D. Skin color

A pulse oximetry reading is the most objective way to assess oxygenation because it gives a numeric value of arterial oxygen saturation (SpO₂) noninvasively and continuously. This directly reflects how much oxygen hemoglobin is carrying in the blood, making it a quantifiable, real-time measure. Lung sounds describe airway or lung conditions but don't quantify how well oxygen is being carried; mental status can change for many reasons beyond oxygen levels and isn't a direct measure of oxygenation; skin color is a subjective sign and can be unreliable, especially under varying lighting or in different skin tones. While arterial blood gas testing would be more precise, it's invasive, so among these options, the SpO₂ reading provides the most objective assessment of oxygenation.

5. Before applying supplemental oxygen, which data should be quickly obtained?

- A. Airway patency
- B. All of the above**
- C. Pulse oximetry
- D. Respiratory rate

The main idea is to quickly gather information on airway, breathing, and oxygenation before giving oxygen. Checking airway patency ensures air can actually reach the lungs; if the airway is blocked or compromised, oxygen won't reach the lungs regardless of how much you administer. Pulse oximetry provides an objective measure of oxygen saturation, helping you decide if supplemental oxygen is needed and, if so, how much to give. Monitoring respiration rate gives insight into how effectively the patient is ventilating and whether they're in distress or at risk for respiratory failure, which can influence the urgency and method of oxygen therapy. Taken together, these three data points give a complete, rapid picture of whether supplemental oxygen is indicated and how to tailor it. If you only looked at one of them, you could miss a blocked airway, unnoticed hypoxemia, or rising work of breathing, leading to ineffective or inappropriate treatment.

6. Which statement is true regarding EMS triage regarding illness or injury perception?

- A. The person must be in immediate danger
- B. The person must consent to EMS
- C. The person must be a minor
- D. Any reasonable person would believe the person is or may be ill or injured**

In EMS triage and field care, actions are guided by what a reasonable bystander would conclude about the situation. If a reasonable person would believe the person is or may be ill or injured, you proceed with assessment and treatment, even if you're not certain of the exact diagnosis. This is the practical idea behind implied consent in emergencies: when someone can't communicate or isn't able to consent, you still provide care to prevent harm. That's why the statement about a reasonable belief of illness or injury is the correct one. It doesn't require the person to be in immediate danger to justify aid, and it doesn't hinge on the person's consent or on whether they are a minor. In emergencies, care begins based on the perceived need, with consent obtained if and when possible.

7. Which statement best describes common signs and symptoms of bacterial pneumonia?

- A. Sore throat with no cough
- B. A fever with chills and a dry cough
- C. Fever and chills with a productive cough producing yellow to brown sputum**
- D. Headache only

The main idea is recognizing how bacterial pneumonia usually presents. It frequently causes fever with chills, signaling systemic infection, and a productive cough that brings up sputum. The sputum is often yellow to brown due to inflammatory cells and bacteria in the airways and alveoli. This combination helps distinguish pneumonia from other illnesses: a sore throat with no cough points to an upper airway issue, a fever with a dry cough suggests viral or non-bacterial causes, and headache alone isn't a pulmonary problem. So, fever and chills with a productive, colored sputum is the best match for typical bacterial pneumonia signs.

8. What is the proper action when an EMS unit is in emergency mode and traveling with an escort through an intersection?

- A. Obey all traffic laws and stop or slow down before crossing the intersection**
- B. Push through the intersection
- C. Stop and wait for police direction
- D. Turn off lights and siren

Even when an EMS unit is in emergency mode with an escort, you must drive with due regard for safety. Intersections are high-risk because cross traffic and pedestrians may not anticipate an emergency vehicle, so the proper action is to slow or stop to verify the path is clear before entering. The escort can help coordinate traffic, but you still must obey traffic signals and right-of-way rules and only proceed when it's safe. Turning off lights and siren removes the warning others rely on, and rushing through ignores controls that protect everyone. Pushing through an intersection outright or waiting for police direction when the escort is already managing movement would not be as safe or efficient as proceeding cautiously when it's clear.

9. What is the first assessment performed on every patient?

- A. Vital Signs Assessment
- B. Secondary Survey
- C. Primary Survey/Resuscitation**
- D. Triage and Dispatch

The first assessment focuses on life threats and is performed through the Primary Survey/Resuscitation. In every patient, you immediately look for problems that can cause death within minutes and address them in order: secure the airway and ensure adequate breathing, assess and support circulation, then check disability (neuro status) and exposure. This ABCDE approach means you don't proceed to a full head to toe examination or gather a full history until you've stabilized the essentials that keep the patient alive. Vital signs and a more detailed check come next, once the patient's immediate risks are managed. Triage and dispatch relate to scene management and getting resources, not the initial patient assessment itself.

10. If signs of tension pneumothorax are present, what immediate action should be performed?

A. Immediate needle decompression or chest thoracostomy

B. Apply ointment and rest

C. Administer IV fluids only

D. Order X-ray first

When tension pneumothorax is suspected, the priority is immediate decompression to relieve the pressure and restore venous return to the heart. The trapped air under pressure collapses the lung and pushes the mediastinum, which can rapidly cause shock and respiratory collapse. The quickest, life-saving action is to relieve the pressure with needle decompression (needle thoracostomy) or a chest thoracostomy as promptly as possible. Do not delay for imaging like an X-ray, as that would waste critical seconds; imaging is not required to treat this condition in the field. While IV fluids may be used to support perfusion, they do not resolve the obstructive physiology and do not substitute for decompression.

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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://platinumemtp33.examzify.com>

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

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