

RELIAS EMERGENCY DEPARTMENT PRACTICE TEST (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

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THE FULL VERSION STUDY GUIDE**

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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. What is the common antidote for acetaminophen overdose?**
 - A. Activated charcoal
 - B. Atropine
 - C. N-acetylcysteine (NAC)
 - D. Calcium gluconate

- 2. When is a patient typically considered "stable" in an emergency setting?**
 - A. When their vital signs are within normal limits and they exhibit no distress
 - B. When they are able to walk independently
 - C. When they ask for pain medication
 - D. When they have been monitored for 12 hours

- 3. What does a Glasgow Coma Scale (GCS) score of 8 or less indicate?**
 - A. Moderate brain injury
 - B. Severe impaired consciousness
 - C. Normal consciousness levels
 - D. Minor concussive symptoms

- 4. In the event of a mass casualty incident, what system is used for triaging victims?**
 - A. ACLS (Advanced Cardiovascular Life Support)
 - B. CE (Critical Evaluation)
 - C. SURGE (Systematic Utilization for Rapid General Evaluation)
 - D. START (Simple Triage and Rapid Treatment) system

- 5. After being struck by lightning, what is the PRIORITY intervention for the patient upon arrival?**
 - A. Monitor cardiac rhythm
 - B. Administer IV fluids
 - C. Assess neurological status
 - D. Place patient on a stretcher

- 6. You want to implement the new evidence-based practice guidelines in managing patients to prevent falls on your unit. What provides the strongest evidence for interventions?**
- A. Expert opinion
 - B. Systematic reviews
 - C. Randomized controlled trials
 - D. Case studies
- 7. Which of the following is a standard initial treatment for severe allergic reactions?**
- A. Administer glucagon
 - B. Provide oxygen therapy
 - C. Administer epinephrine
 - D. Start intravenous fluids
- 8. According to the American Heart Association, what is the critical goal time from ED arrival to CT brain scan for stroke patients?**
- A. 10 minutes
 - B. 20 minutes
 - C. 25 minutes
 - D. 30 minutes
- 9. Which of the following statements regarding workplace safety is correct?**
- A. Only physical threats need to be reported
 - B. Non-violent behavior does not need documentation
 - C. All incidents affecting safety should be documented
 - D. Verbal threats are less serious than physical threats
- 10. What is the primary concern for a patient receiving treatment after a lightning strike?**
- A. Burns
 - B. Electrical injury
 - C. Cardiac rhythm monitoring
 - D. Neurological assessment

Answers

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

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Explanations

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1. What is the common antidote for acetaminophen overdose?

- A. Activated charcoal
- B. Atropine
- C. N-acetylcysteine (NAC)**
- D. Calcium gluconate

N-acetylcysteine (NAC) is the most effective antidote for acetaminophen overdose. It works primarily by replenishing glutathione stores in the liver, which can be depleted during acetaminophen metabolism under overdose conditions. Glutathione is crucial for the detoxification of harmful metabolites produced when acetaminophen is broken down. By enhancing the liver's ability to neutralize these toxic substances, NAC significantly reduces the risk of liver damage and improves patient outcomes. The administration of NAC is particularly effective when given within the first 8-10 hours after the acetaminophen ingestion, but it can still provide benefits even later. Its role in the clinical management of acetaminophen toxicity has been well established, making it a key treatment in emergency medicine protocols. Activated charcoal is a method of gastrointestinal decontamination and may be used in certain situations if administered shortly after ingestion, but it does not specifically treat the metabolic derangement caused by an acetaminophen overdose. Atropine is used to manage bradycardia or certain types of poisoning but does not have a role in acetaminophen toxicity. Calcium gluconate is primarily used for treating hypocalcemia or magnesium toxicity and is not indicated for acetaminophen overdose.

2. When is a patient typically considered "stable" in an emergency setting?

- A. When their vital signs are within normal limits and they exhibit no distress**
- B. When they are able to walk independently
- C. When they ask for pain medication
- D. When they have been monitored for 12 hours

A patient is typically considered "stable" in an emergency setting when their vital signs are within normal limits and they exhibit no distress. Stability indicates that the patient's condition is not deteriorating and is manageable. Normal vital signs, such as heart rate, blood pressure, respiratory rate, and temperature, suggest that the patient's physiological status is within expected parameters. Additionally, the absence of distress—such as visible pain, anxiety, or difficulty breathing—further reinforces the idea that the patient is currently stable and not in immediate danger of a life-threatening condition. Other options might misinterpret what constitutes stability. While independence in walking may suggest some level of functional ability, it does not necessarily indicate the overall stability of a patient's medical condition. Requests for pain medication don't directly convey stability as they can arise from various reasons that may still indicate an underlying issue. Monitoring a patient for an extended period, such as 12 hours, does not in itself determine stability either, since conditions can fluctuate rapidly in an emergency context. Therefore, the most reliable indicators of stability in an emergency setting revolve around the assessment of vital signs and the patient's general state of distress.

3. What does a Glasgow Coma Scale (GCS) score of 8 or less indicate?

- A. Moderate brain injury
- B. Severe impaired consciousness**
- C. Normal consciousness levels
- D. Minor concussive symptoms

A Glasgow Coma Scale (GCS) score of 8 or less indicates severely impaired consciousness. The GCS is a clinical tool used to assess a patient's level of consciousness and neurological function following brain injury. It scores a patient based on three components: eye opening, verbal responses, and motor responses. A score of 8 or less suggests that the patient is in a state of altered consciousness or is unresponsive, which may indicate a significant impairment in brain function or potentially life-threatening conditions. This level of score categorically suggests that the patient may be in a coma or near-comatose state. In clinical practice, such a score typically necessitates urgent medical evaluation and intervention, as it may signify the need for advanced diagnostic imaging or protective measures, such as airway management. Scores above 8 generally indicate varying degrees of consciousness, with higher scores reflecting better neurological function and responsiveness. Therefore, in the context of the GCS, a score of 8 or lower clearly indicates severe impairment in consciousness rather than moderate brain injury, normal consciousness levels, or minor symptoms, which would present with higher GCS scores.

4. In the event of a mass casualty incident, what system is used for triaging victims?

- A. ACLS (Advanced Cardiovascular Life Support)
- B. CE (Critical Evaluation)
- C. SURGE (Systematic Utilization for Rapid General Evaluation)
- D. START (Simple Triage and Rapid Treatment) system**

The START system, which stands for Simple Triage and Rapid Treatment, is specifically designed for triaging victims in a mass casualty incident. This method provides a quick and effective way to assess patients based on the severity of their injuries and the urgency of their need for medical care. It categorizes patients into different groups based on their immediate needs, allowing emergency responders to prioritize treatment efficiently during overwhelming situations. Using the START system, victims are typically classified into four categories: immediate (red), delayed (yellow), minimal (green), and deceased (black). This categorization helps medical personnel make split-second decisions about who requires immediate attention and who can wait for treatment, which is crucial in scenarios where resources may be limited, and many individuals need care simultaneously. This approach not only facilitates rapid decision-making but also enhances the overall response ability of medical teams during disasters, ensuring that those who are most in need receive care first. The efficiency and practicality of the START system make it a vital tool in emergency management, allowing for a structured response that aligns with the principles of triage.

5. After being struck by lightning, what is the PRIORITY intervention for the patient upon arrival?

- A. Monitor cardiac rhythm**
- B. Administer IV fluids
- C. Assess neurological status
- D. Place patient on a stretcher

The priority intervention for a patient who has been struck by lightning is to monitor cardiac rhythm. Lightning strikes can lead to a variety of complications, including cardiac arrest or arrhythmias due to the electrical current passing through the body. Therefore, it is essential to continuously assess the patient's heart rhythm to quickly identify any life-threatening conditions such as these. Monitoring cardiac rhythm allows healthcare providers to detect abnormalities early and intervene promptly, which is critical in these situations where the risk of sudden cardiac events is significant. While assessing neurological status, administering IV fluids, and transporting the patient safely are important components of subsequent care, the immediate focus should be on ensuring the patient's heart is functioning properly.

6. You want to implement the new evidence-based practice guidelines in managing patients to prevent falls on your unit. What provides the strongest evidence for interventions?

- A. Expert opinion
- B. Systematic reviews**
- C. Randomized controlled trials
- D. Case studies

The strongest evidence for interventions in clinical practice is found in systematic reviews. These reviews synthesize findings from multiple studies, assessing the quality and reliability of the evidence. By consolidating data from various randomized controlled trials and observational studies, systematic reviews provide a comprehensive overview of best practices, ensuring that recommendations are based on a wider evidence base rather than isolated findings. Systematic reviews prioritize well-designed studies and critically evaluate their methodologies, which helps to identify which interventions are most effective for patient care. This makes them an essential resource for healthcare professionals seeking to implement evidence-based practices, particularly in areas like fall prevention, where patient safety is paramount. Other options, such as expert opinion, randomized controlled trials, and case studies, do not offer the same level of comprehensive evaluation and consensus that systematic reviews provide. Expert opinions can provide insights but lack the robustness of aggregated studies. Randomized controlled trials are highly valuable on their own but may not be as broadly applicable when considered in isolation. Case studies provide real-world examples but do not offer the rigorous evidence needed to guide widespread clinical practice. Thus, relying on systematic reviews ensures that interventions are underpinned by the strongest available evidence.

7. Which of the following is a standard initial treatment for severe allergic reactions?

- A. Administer glucagon
- B. Provide oxygen therapy
- C. Administer epinephrine**
- D. Start intravenous fluids

The standard initial treatment for severe allergic reactions, particularly anaphylaxis, is the administration of epinephrine. Epinephrine works rapidly to counteract the effects of severe allergic reactions by causing vasoconstriction, bronchodilation, and reducing vascular permeability. This helps to stabilize the patient by increasing blood pressure, improving airflow to the lungs, and minimizing swelling. The quick action of epinephrine is critical in preventing potentially life-threatening complications associated with anaphylaxis. Other treatments, while important in a comprehensive emergency management plan, are not the first line for severe allergic reactions. For example, administering glucagon is appropriate for certain cases of severe hypoglycemia or as a countermeasure against beta-blocker overdose but is not used for allergic reactions. Providing oxygen therapy is beneficial for patients experiencing respiratory distress, but it does not address the underlying anaphylactic process. Starting intravenous fluids may be necessary in cases of shock or significant fluid loss, but again, it does not resolve the immediate symptoms of anaphylaxis. Administering epinephrine remains the most crucial and time-sensitive intervention in a severe allergic reaction scenario.

8. According to the American Heart Association, what is the critical goal time from ED arrival to CT brain scan for stroke patients?

- A. 10 minutes
- B. 20 minutes
- C. 25 minutes**
- D. 30 minutes

The critical goal time from emergency department (ED) arrival to computed tomography (CT) brain scan for stroke patients is 25 minutes, according to the American Heart Association. This timeframe is essential because prompt imaging can lead to quicker diagnosis and treatment, which are crucial in managing stroke cases effectively. The immediate assessment through CT helps determine whether a stroke is ischemic or hemorrhagic, allowing for appropriate interventions to be initiated without delay. Additionally, the 25-minute target aligns with the overarching objective of minimizing the time from symptom onset to treatment, known as "door-to-needle" time, which is vital for improving patient outcomes in strokes. By setting this goal, healthcare providers are encouraged to streamline processes and prioritize stroke care in the ED, ensuring that patients receive timely evaluations and treatments that can significantly reduce long-term disability and mortality rates associated with strokes.

9. Which of the following statements regarding workplace safety is correct?

- A. Only physical threats need to be reported
- B. Non-violent behavior does not need documentation
- C. All incidents affecting safety should be documented**
- D. Verbal threats are less serious than physical threats

Documenting all incidents that affect safety is essential for maintaining a safe workplace environment. Accurate documentation serves several important purposes: it allows for the identification of patterns or recurring issues, facilitates better communication among staff regarding safety concerns, and provides a reliable record for investigations or legal matters if they arise. By documenting all incidents, including near-misses and non-violent behaviors, organizations can implement proactive measures to mitigate risks and enhance overall safety. Documentation also ensures that all staff members are aware of safety protocols and can address concerns more effectively, reinforcing the culture of safety within the workplace. Therefore, recognizing that every incident, regardless of its perceived severity, has the potential to affect workplace safety is critical for fostering a safe environment for all employees.

10. What is the primary concern for a patient receiving treatment after a lightning strike?

- A. Burns
- B. Electrical injury
- C. Cardiac rhythm monitoring**
- D. Neurological assessment

The primary concern for a patient receiving treatment after a lightning strike is cardiac rhythm monitoring. Lightning strikes can cause significant electrical injuries that may lead to cardiac arrhythmias. The intense electrical current can disrupt the heart's normal rhythm, causing conditions such as ventricular fibrillation or asystole. It is crucial to monitor the patient's cardiac rhythm closely to identify and manage any potentially life-threatening arrhythmias promptly. While burns and neurological assessments are also important considerations, monitoring the cardiac function takes precedence because of the immediate risk to life posed by cardiac dysrhythmias. It's essential for medical personnel to stabilize the patient's heart function, as this can be a critical and time-sensitive issue following such an electrical injury.

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://reliasemergencydepartment.examzify.com>

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

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