RQI Basic Life Support (BLS) Provider Practice Test (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

1. Which statement best describes a consideration when applying AED pads related to chest hair?

A. Water around the chest has no effect on pad adhesion

B. Excessive chest hair may prevent proper pad adhesion

C. Patches must be removed after pad placement

D. Implants must be removed before using AED

2. Which age or weight criterion indicates the use of pediatric pads when an AED is used on a child?

A. Under 8 years

B. Under 25 kg

C. Under 8 years or under 25 kg

D. Under 12 years or under 40 kg

3. If ROSC is achieved, what is the next phase of management?

A. Immediately discharge to home

B. Resume high-quality CPR indefinitely

C. Transport to hospital without monitoring

D. Transition to post-resuscitation care.

4. How long should you continue CPR before reassessing with the AED in a two-rescuer scenario?

A. 30 seconds

B. About 2 minutes (5 cycles)

C. 4 minutes

D. 10 minutes

5. During resuscitation of a pregnant patient, you should ensure appropriate positioning for whom?

A. Both mother and fetus

B. Only the mother

C. Only the fetus

D. Positioning is not important

6. What impact does minimizing pauses in compressions during CPR have on chest compression fraction (CCF)?

A. No effect

B. Decreases CCF

C. Increases CCF

D. Increases time between cycles

7. How should a child be positioned for chest compressions, and what depth is recommended?

A. Place hands on the center of the chest; depth about 2 inches (5 cm) or 1/3 chest depth

B. Place hands on the left chest; depth about 1 inch

C. Two hands on the back; depth about 3 inches

D. Use two fingers on the chest; depth about 4 inches

8. Why is early defibrillation important?

A. Increases the person's chance of survival

B. Slows heart rate

C. Prevents bleeding

D. Improves oxygen delivery

9. For infant CPR with a single rescuer, what is the compression-ventilation ratio?

A. 30:2

B. 15:2

C. 20:2

D. 10:2

10. Which technique is no longer recommended for infant chest compressions?

A. Two-thumb-encircling hands

B. One-hand chest compressions

C. Two-finger chest compressions

D. Multiple rescuer technique

Answers

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

Explanations

1. Which statement best describes a consideration when applying AED pads related to chest hair?

A. Water around the chest has no effect on pad adhesion

B. Excessive chest hair may prevent proper pad adhesion

C. Patches must be removed after pad placement

D. Implants must be removed before using AED

Effective defibrillation hinges on solid pad-to-skin contact. Excessive chest hair can prevent the AED pads from sticking firmly, creating gaps and higher skin impedance that reduce the current delivered to the heart. If hair blocks adhesion, quickly shave the area where the pads will go (or follow the device's guidance for pad placement) to ensure a good seal. Don't delay the shock for lengthy hair removal. Water on the chest can undermine adhesion and increase impedance, so it wouldn't help, and you don't remove implants or patches after pad placement.

2. Which age or weight criterion indicates the use of pediatric pads when an AED is used on a child?

A. Under 8 years

B. Under 25 kg

C. Under 8 years or under 25 kg

D. Under 12 years or under 40 kg

When deciding which pads to use with an AED on a child, you switch to pediatric pads to deliver lower energy and reduce the risk of injury in smaller bodies. The guidance is to use pediatric pads if the child is younger than eight years old or weighs less than 25 kilograms. This means that if either condition is met, pediatric pads should be used. If the child is eight or older and weighs at least 25 kg, you can use the standard adult pads.

3. If ROSC is achieved, what is the next phase of management?

A. Immediately discharge to home

B. Resume high-quality CPR indefinitely

C. Transport to hospital without monitoring

D. Transition to post-resuscitation care.

After ROSC, the next phase is post-resuscitation care. This means shifting from getting the heart beating again to stabilizing the patient and protecting the brain and organs. Focus on secure airway and adequate ventilation/oxygenation, ensure good perfusion with appropriate blood pressure support, and use targeted temperature management if indicated to reduce brain injury. The patient should be monitored closely in an appropriate setting (often ICU) with a rapid workup for reversible causes and early consideration of definitive treatments, such as coronary evaluation if a cardiac cause is suspected. Discharging home or continuing CPR indefinitely aren't appropriate once ROSC is achieved; the next step is structured post-resuscitation care in a monitored setting.

4. How long should you continue CPR before reassessing with the AED in a two-rescuer scenario?

A. 30 seconds

B. About 2 minutes (5 cycles)

C. 4 minutes

D. 10 minutes

In two-rescuer CPR, the priority is maintaining high-quality chest compressions to maximize blood flow, while still checking the rhythm with the AED at appropriate intervals. Reassessing with the AED about every two minutes allows you to determine if a shock is needed without unduly interrupting chest compressions. This 2-minute window roughly equals five cycles of CPR (about five rounds of compressions with ventilations at the typical 30:2 ratio). After each two-minute period, you pause briefly for the AED to analyze and, if indicated, deliver a shock, then immediately resume CPR. Shorter intervals like 30 seconds would cause excessive interruptions, while much longer intervals delay potential shocks and reduce perfusion.

5. During resuscitation of a pregnant patient, you should ensure appropriate positioning for whom?

A. Both mother and fetus

B. Only the mother

C. Only the fetus

D. Positioning is not important

During resuscitation in pregnancy, the uterus can press on major vessels when the mother lies flat, cutting off return of blood to the heart and reducing both maternal cardiac output and fetal oxygen delivery. Placing the mother in a left lateral tilt or manually displacing the uterus to the left relieves this aortocaval compression, improves venous return, and enhances uteroplacental blood flow. By optimizing the mother's circulation, you indirectly optimize the fetus's oxygen supply as well, so positioning matters for both. Hence, the best answer is that you should consider appropriate positioning for both mother and fetus.

6. What impact does minimizing pauses in compressions during CPR have on chest compression fraction (CCF)?

A. No effect

B. Decreases CCF

C. Increases CCF

D. Increases time between cycles

Minimizing pauses in chest compressions increases the chest compression fraction because CCF is the portion of total CPR time spent delivering compressions. When you shorten or remove pauses, a greater share of the CPR interval is compressions, raising CCF. A higher CCF means more continuous compressions and better perfusion during CPR; longer pauses would lower CCF.

7. How should a child be positioned for chest compressions, and what depth is recommended?

A. Place hands on the center of the chest; depth about 2 inches (5 cm) or 1/3 chest depth

B. Place hands on the left chest; depth about 1 inch

C. Two hands on the back; depth about 3 inches

D. Use two fingers on the chest; depth about 4 inches

For pediatric chest compressions, place your hands on the center of the chest, over the lower half of the sternum, and compress to about one third of the chest depth—roughly 2 inches (5 cm). This depth provides effective circulation for a child while minimizing the risk of injury, and you can use one hand for smaller children or two hands for larger ones as needed. Other options misplace the hands, target the back, or use an incorrect depth (too shallow or too deep) for pediatric patients.

8. Why is early defibrillation important?

A. Increases the person's chance of survival

B. Slows heart rate

C. Prevents bleeding

D. Improves oxygen delivery

Early defibrillation matters because in sudden cardiac arrest caused by ventricular fibrillation or pulseless ventricular tachycardia there is no effective heartbeat. A shock can reset the heart's electrical activity, allowing a normal rhythm to resume and circulation to restart. The quicker this happens, the better the chance of survival and a good neurological outcome, since brain and organ oxygenation are preserved longer with faster restoration of circulation. Defibrillation directly addresses the heart's rhythm, not by slowing it, stopping bleeding, or delivering oxygen on its own; those effects come from other parts of the resuscitation effort, while defibrillation is the key step that restores a functioning heartbeat.

9. For infant CPR with a single rescuer, what is the compression-ventilation ratio?

A. 30:2

B. 15:2

C. 20:2

D. 10:2

For a single rescuer performing infant CPR, the compression-to-ventilation ratio is 30 compressions followed by 2 breaths. This approach prioritizes delivering enough chest compressions to maintain circulation while keeping pauses short for ventilations. Aim for a rate of about 100–120 compressions per minute, with the two breaths delivered quickly after the 30th compression. If a second rescuer is available, the ratio shifts to 15:2, which allows more frequent ventilations with shorter overall pauses in compressions.

10. Which technique is no longer recommended for infant chest compressions?

A. Two-thumb-encircling hands

B. One-hand chest compressions

C. Two-finger chest compressions

D. Multiple rescuer technique

The important idea is that hand position during infant chest compressions greatly affects how effective each compression is. The two-finger method is no longer recommended because it tends to produce shallower, less consistent compressions on the small infant chest and can cause fatigue or less control. The preferred approach, especially when two rescuers are present, is the two-thumb-encircling technique. With this method, both hands encircle the chest and the thumbs stay on the sternum while the fingers support the back. This grip allows deeper, more consistent compressions, better chest recoil, and less fatigue, which improves overall CPR quality for infants.

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://rqiblsprovider.examzify.com

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