

RQI BASIC LIFE SUPPORT (BLS) PROVIDER 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. After delivering a shock with the AED, what is the immediate next step?**
 - A. Resume CPR immediately starting with chest compressions
 - B. Check for pulse
 - C. Reassess breathing
 - D. Wait 2 minutes

- 2. To achieve the best chest compression fraction (CCF), what action should you take?**
 - A. Increase ventilation rate
 - B. Limit pauses in compressions
 - C. Increase AED analysis frequency
 - D. Stop compressions during analysis

- 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. A chest compression feedback device provides feedback on which aspect of chest compressions?**
 - A. Compression rate.
 - B. Chest recoil.
 - C. Compression depth.
 - D. Ventilation rate.

- 5. What is the recommended chest compression rate for a child?**
 - A. 60-80 per minute
 - B. 80-100 per minute
 - C. 100-120 per minute
 - D. 140-160 per minute

- 6. If you cannot locate the AED quickly, what should you do?**
- A. Begin CPR immediately and continue until the AED arrives or responders take over
 - B. Wait for AED
 - C. Stop CPR until AED arrives
 - D. Apply barrier device and wait
- 7. What is the correct depth of compressions for high-quality CPR on a child?**
- A. Approximately 3 inches (7.5 cm)
 - B. Approximately 0.5 inch (1.3 cm)
 - C. Approximately 2 inches (5 cm)
 - D. Approximately 1 inch (2.5 cm)
- 8. Which sign most clearly indicates a severe airway obstruction requiring immediate action?**
- A. Inability to speak
 - B. Laughing
 - C. Whispering
 - D. Normal breathing
- 9. In a pulse check for an unresponsive adult, which action should you perform?**
- A. Assess for a pulse for at least 5 but no more than 10 seconds.
 - B. Use 2 or 3 fingers to locate the pulse.
 - C. Feel for a pulse in the groove of the neck, to the side of the trachea.
 - D. None of the above.
- 10. Where should AED pads be placed relative to an implanted defibrillator/device?**
- A. At least some distance away from the device
 - B. Directly over the device
 - C. On the back only
 - D. On the legs only

Answers

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

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Explanations

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1. After delivering a shock with the AED, what is the immediate next step?

- A. Resume CPR immediately starting with chest compressions
- B. Check for pulse
- C. Reassess breathing
- D. Wait 2 minutes

Start chest compressions immediately after the shock. Defibrillation may restart some rhythm, but circulation still needs to be established, so continuing CPR maintains blood flow to the brain and heart. Pausing to check for a pulse or waiting for a full pause wastes precious time; the AED will guide the next rhythm check or shock after you've continued CPR.

2. To achieve the best chest compression fraction (CCF), what action should you take?

- A. Increase ventilation rate
- B. Limit pauses in compressions
- C. Increase AED analysis frequency
- D. Stop compressions during analysis

Maximizing chest compression fraction means keeping compressions going as much as possible and minimizing the time you pause. Blood flow during CPR depends on continuous chest compressions, so the best way to boost survival chances is to limit interruptions for ventilations or rhythm checks. While some pauses are necessary for defibrillation and breaths, you reduce their impact by coordinating the team, precharging the defibrillator during compressions, and resuming compressions immediately after any shock or analysis. Increasing ventilation rate would add pauses and disrupt flow, pausing for repeated AED analyses or stopping during analysis would drastically cut the time compressions are delivered. Therefore, the action that best improves CCF is limiting pauses in compressions.

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. A chest compression feedback device provides feedback on which aspect of chest compressions?

- A. Compression rate.
- B. Chest recoil.**
- C. Compression depth.
- D. Ventilation rate.

Real-time chest compression feedback devices focus on how the chest moves during CPR to improve quality. They can alert you if the chest is not allowed to recoil fully after a compression, signaling incomplete chest recoil or leaning. Full chest recoil is crucial because it allows venous return to the heart and helps maintain coronary and cerebral perfusion during CPR. While some devices may also display metrics like rate or depth, the aspect highlighted here is ensuring complete chest recoil. Ventilation rate is tracked separately and not the primary function of this chest compression feedback.

5. What is the recommended chest compression rate for a child?

- A. 60-80 per minute
- B. 80-100 per minute
- C. 100-120 per minute**
- D. 140-160 per minute

Maintaining an appropriate chest compression rate is essential because it directly affects how well blood is circulated with each push. For a child in CPR, the recommended rate is 100 to 120 compressions per minute. This range strikes a balance: it's fast enough to sustain perfusion of the heart and brain, but not so fast that you can't compress deeply or allow full chest recoil between pushes. Rates well below this limit reduce blood flow, while pushing too quickly can lead to shallower compressions and incomplete recoil, both of which diminish effectiveness. A practical tip is to pace compressions around 100–120 per minute to stay within the optimal range.

6. If you cannot locate the AED quickly, what should you do?

- A. Begin CPR immediately and continue until the AED arrives or responders take over**
- B. Wait for AED
- C. Stop CPR until AED arrives
- D. Apply barrier device and wait

The essential idea is to keep blood flowing to vital organs while you're locating the AED. If you can't find it right away, start high-quality CPR immediately and keep going until the AED arrives or trained responders take over. Chest compressions pump blood to the brain and heart, buying time and improving the chances of survival once a shock can be delivered. Waiting for the AED to arrive before starting CPR delays essential circulation and lowers survival chances. Stopping CPR until the AED arrives interrupts perfusion and is not advised. Using a barrier device is important for protection, but delaying CPR to wait or only applying a barrier device without starting compressions does not help the patient in cardiac arrest.

7. What is the correct depth of compressions for high-quality CPR on a child?

- A. Approximately 3 inches (7.5 cm)
- B. Approximately 0.5 inch (1.3 cm)
- C. Approximately 2 inches (5 cm)**
- D. Approximately 1 inch (2.5 cm)

High-quality CPR hinges on compressions that are deep enough to move blood but not so deep as to cause injury. For a child, aim for about 2 inches (5 cm) of depth, which is roughly one-third of the chest's width. This depth provides sufficient blood flow to the heart and brain during compressions. If you compress much less, perfusion drops and outcomes worsen; compressing a lot deeper is unnecessary risk, though 2 inches stays within a safe, effective range. Use two hands on larger children to reach this depth, switch roles if there are two rescuers, and maintain a rate of about 100–120 compressions per minute with full chest recoil between compressions.

8. Which sign most clearly indicates a severe airway obstruction requiring immediate action?

- A. Inability to speak**
- B. Laughing
- C. Whispering
- D. Normal breathing

The main idea is distinguishing complete versus partial airway obstruction. When someone cannot speak, it almost always means the airway is completely blocked and no air is getting through, so immediate action is required to try to relieve the obstruction. Laughing or whispering shows some air is moving, indicating a partial obstruction, while normal breathing means the airway is not blocked. Therefore, the inability to speak is the clearest sign that a severe obstruction is present and needs prompt intervention (such as abdominal thrusts for a conscious adult). If the person becomes unresponsive, start CPR and check the mouth for the object before giving compressions.

9. In a pulse check for an unresponsive adult, which action should you perform?

- A. Assess for a pulse for at least 5 but no more than 10 seconds.**
- B. Use 2 or 3 fingers to locate the pulse.
- C. Feel for a pulse in the groove of the neck, to the side of the trachea.
- D. None of the above.

When you're checking an unresponsive adult, the priority is to determine quickly whether a pulse is present so you can decide if CPR is needed. The pulse check should be brief—about 5 to 10 seconds. This short window minimizes delay in starting chest compressions if there's no pulse, which is crucial for the person's chance of survival. In practice, you would locate the carotid pulse on the neck, in the groove beside the trachea, and feel for it with your index and middle fingers. If you don't feel a pulse within that brief check, you should start CPR right away. If a pulse is present, you would continue to monitor breathing and provide rescue breaths only if breathing is not adequate. The other details (where to feel for the pulse and which fingers to use) are correct techniques, but the key action the question is testing is performing the pulse check for a limited time.

10. Where should AED pads be placed relative to an implanted defibrillator/device?

A. At least some distance away from the device

B. Directly over the device

C. On the back only

D. On the legs only

The important idea is to avoid placing AED pads directly over an implanted defibrillator or pacemaker. Shocking over the device can interfere with its function, cause burns, or alter the device's sensing and therapy timing. To keep the device safe and still deliver an effective shock, place the pads so the electrical current travels through the heart without passing through the device. If the implanted device is under the left collarbone, position the pads away from that area—typically one pad on the right upper chest and the other on the left chest but away from the device, or switch to an anterior-posterior arrangement if needed. The key is maintaining a clear path for the shock while not overlapping the device.

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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://rqiblsprovider.examzify.com>

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

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