

# ScribeAmerica Emergency Room Practice Exam (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**

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- 1. D-Dimer must be ordered alongside which of the following tests?**
  - A. Chest X-ray**
  - B. CTA Chest or VQ Scan**
  - C. Urinalysis**
  - D. CT Abdomen**
- 2. Which red flag symptom indicates a potential need for urgent evaluation in a patient with low back pain?**
  - A. Numbness of the toes**
  - B. Intermittent Pain**
  - C. Increased Flexibility**
  - D. Loss of bowel or bladder control**
- 3. What is the appropriate procedure for treating an abscess?**
  - A. Incision and Drainage**
  - B. Joint Reduction**
  - C. Lumbar Puncture**
  - D. Chest Tube**
- 4. If a patient has a diagnosis of appendicitis, which symptom is likely to be prominent?**
  - A. Right lower quadrant pain**
  - B. Chest pain**
  - C. Dyspnea**
  - D. Hemoptysis**
- 5. What medical history does a patient need for a Partial Lobectomy?**
  - A. A history of chronic lung infection**
  - B. A history of lung cancer**
  - C. A history of asthma**
  - D. A history of heart disease**

**6. Which of the following could be a consequence of hemorrhagic cerebrovascular accident?**

- A. Headache**
- B. Loss of consciousness**
- C. Palpitations**
- D. Shortness of breath**

**7. What is the focus of a patient's History of Present Illness (HPI)?**

- A. A summary of past medical history**
- B. The symptoms leading to the current health concern**
- C. Detailed findings from physical exams**
- D. Results from diagnostic tests**

**8. Which symptoms are red flags for a myocardial infarction?**

- A. Pleuritic pain**
- B. Calf pain**
- C. Diaphoresis, Nausea, Vomiting**
- D. Radiation of pain to the back**

**9. What does a CTA Chest primarily evaluate?**

- A. Pulmonary Embolism**
- B. Cystic Fibrosis**
- C. Lung Cancer**
- D. Pneumonia**

**10. In which condition would you expect to find increased calor?**

- A. URI**
- B. Streptococcal Pharyngitis**
- C. Otitis Media**
- D. Inflammation or infection**

## **Answers**

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

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## **Explanations**

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**1. D-Dimer must be ordered alongside which of the following tests?**

- A. Chest X-ray**
- B. CTA Chest or VQ Scan**
- C. Urinalysis**
- D. CT Abdomen**

D-Dimer is a blood test that measures the presence of fibrin degradation products, which can indicate the presence of an abnormal blood clot in the body. It is especially useful in the evaluation of conditions such as pulmonary embolism (PE) or deep vein thrombosis (DVT). In clinical practice, when D-Dimer is elevated, it often prompts further diagnostic imaging to confirm or rule out these conditions. Ordering a CT Angiogram (CTA) of the chest or a Ventilation-Perfusion (VQ) scan after measuring D-Dimer is appropriate because these imaging modalities are designed specifically to visualize potential pulmonary emboli. The CTA provides detailed images of the blood vessels in the lungs, allowing for the identification of clots, while the VQ scan assesses both airflow and blood flow in the lungs, which can also help diagnose PE. The other options, such as a chest X-ray, urinalysis, and CT abdomen, do not have the same direct relevance to the evaluation of thromboembolic disease as a CTA or VQ scan does when used in conjunction with a D-Dimer test. While a chest X-ray may be used as an initial imaging study for various chest concerns, it does not specifically assess for blood clots.

**2. Which red flag symptom indicates a potential need for urgent evaluation in a patient with low back pain?**

- A. Numbness of the toes**
- B. Intermittent Pain**
- C. Increased Flexibility**
- D. Loss of bowel or bladder control**

Loss of bowel or bladder control is considered a red flag symptom that indicates a potential need for urgent evaluation in a patient with low back pain. This symptom can suggest serious underlying conditions, such as cauda equina syndrome, which is a medical emergency that can lead to permanent loss of function if not addressed promptly. In such cases, the spinal nerves that control bowel and bladder function may be severely compressed, requiring immediate intervention. Recognizing this symptom is crucial, as it highlights the need for further diagnostic evaluation and potentially urgent surgical treatment. Identifying and addressing these red flags appropriately can make a significant difference in patient outcomes. Other symptoms, while they may warrant further investigation, do not typically carry the same level of urgency as loss of bowel or bladder control.

### 3. What is the appropriate procedure for treating an abscess?

- A. Incision and Drainage**
- B. Joint Reduction**
- C. Lumbar Puncture**
- D. Chest Tube**

The appropriate procedure for treating an abscess is incision and drainage. An abscess is a localized collection of pus that typically occurs due to infection. The primary goal in managing an abscess is to relieve pressure, allow for proper drainage of the infected material, and promote healing. Incision and drainage entails making an incision over the site of the abscess to allow the pus to escape. This procedure helps to clear the infection and reduce inflammation, often also allowing for the drainage of any debris within the abscess cavity. After drainage, the area may be irrigated, and depending on the size and complexity of the abscess, packing may be used to allow for proper healing. In contrast, joint reduction, lumbar puncture, and chest tube procedures are not relevant for the treatment of abscesses. Joint reduction is aimed at aligning dislocated joints, lumbar puncture is performed to collect cerebrospinal fluid for diagnostic purposes, and chest tubes are used to drain fluid or air from the pleural space. Each of these procedures is specific to different medical conditions and does not address the need for drainage in an abscess.

### 4. If a patient has a diagnosis of appendicitis, which symptom is likely to be prominent?

- A. Right lower quadrant pain**
- B. Chest pain**
- C. Dyspnea**
- D. Hemoptysis**

Right lower quadrant pain is a hallmark symptom of appendicitis. This pain typically begins as a general discomfort around the navel, which then migrates to the right lower quadrant of the abdomen as the inflammation progresses. The location of the pain is significant because the appendix is situated in this area, and inflammation often irritates the surrounding abdominal tissues. Additionally, patients may exhibit tenderness upon palpation in the right lower quadrant, encouraging further suspicion of appendicitis. In contrast, chest pain, dyspnea, and hemoptysis do not correlate with appendicitis. Chest pain usually indicates cardiac issues or lung problems, while dyspnea can suggest respiratory conditions. Hemoptysis, the coughing up of blood, does not relate to appendicitis and indicates bleeding within the respiratory tract. Therefore, the symptom of right lower quadrant pain is specifically associated with appendicitis and crucial for its diagnosis.

## 5. What medical history does a patient need for a Partial Lobectomy?

- A. A history of chronic lung infection
- B. A history of lung cancer**
- C. A history of asthma
- D. A history of heart disease

A history of lung cancer is the most relevant medical history for a patient undergoing a partial lobectomy. This surgical procedure involves removing a portion of a lung, typically performed to treat lung cancer, where the goal is to excise malignant tissue while preserving as much healthy lung tissue as possible. Patients with lung cancer may require this procedure to remove tumor masses, alleviate symptoms caused by the cancer, or improve overall lung function. In contrast, chronic lung infections, asthma, or heart disease may impact a patient's overall health and considerations for surgery, but they are not primary indications for a partial lobectomy. Chronic lung infections may lead to considerations for procedures like lung resection, but would not be the direct reason for a lobectomy. Asthma is a manageable respiratory condition and does not warrant surgical intervention like a lobectomy. Heart disease is pertinent for assessing surgical risk but does not directly relate to the need for lung tissue removal as seen in lung cancer.

## 6. Which of the following could be a consequence of hemorrhagic cerebrovascular accident?

- A. Headache
- B. Loss of consciousness**
- C. Palpitations
- D. Shortness of breath

A hemorrhagic cerebrovascular accident (CVA), commonly known as a hemorrhagic stroke, occurs when a blood vessel in the brain ruptures, resulting in bleeding and damage to surrounding tissue. One of the significant consequences of this type of stroke is the potential for loss of consciousness. This can happen due to increased intracranial pressure from the bleeding, which may cause brain dysfunction or a decrease in blood flow to vital areas of the brain responsible for consciousness. In some cases, loss of consciousness could also indicate severe brain injury or significant neurological compromise, which requires immediate medical attention. The life-threatening nature of hemorrhagic strokes means that patients can rapidly deteriorate, and loss of consciousness is a critical sign that the situation is serious and may warrant urgent intervention. Other symptoms like headache may occur, often as a warning sign of a bleed in the brain, but they do not typically indicate a direct outcome from the event itself. Palpitations and shortness of breath are more commonly associated with cardiac or respiratory issues rather than directly resulting from a hemorrhagic stroke. Therefore, loss of consciousness stands out as a direct and serious consequence representative of the neurological impact of a hemorrhagic cerebrovascular accident.

## 7. What is the focus of a patient's History of Present Illness (HPI)?

- A. A summary of past medical history
- B. The symptoms leading to the current health concern**
- C. Detailed findings from physical exams
- D. Results from diagnostic tests

The focus of a patient's History of Present Illness (HPI) is on the symptoms leading to the current health concern. The HPI provides a detailed account of the onset, duration, and characteristics of the symptoms the patient is experiencing, as well as any exacerbating or alleviating factors. This information is crucial as it helps clinicians understand the context of the patient's current condition and guides further diagnosis and treatment. The HPI is not intended to summarize past medical history, which would include information about prior conditions, surgeries, and treatments. It also does not delve into the specific findings from physical examinations or the results of any diagnostic tests, as those are typically documented in other sections of the medical record. The focus on current symptoms and their related details allows healthcare providers to form a clearer picture of the patient's immediate health issue, making it a vital component in the evaluation process.

## 8. Which symptoms are red flags for a myocardial infarction?

- A. Pleuritic pain
- B. Calf pain
- C. Diaphoresis, Nausea, Vomiting**
- D. Radiation of pain to the back

Diaphoresis, nausea, and vomiting are indeed red flags for a myocardial infarction. These symptoms can occur as a result of the heart's ischemic environment during a heart attack. When the heart muscle does not receive enough oxygen, it can lead to a cascade of systemic reactions, including the release of stress hormones that induce sweating (diaphoresis) and stimulate the gastrointestinal tract, causing nausea and potentially vomiting. These symptoms, especially when they occur in conjunction with chest pain or discomfort, should alert healthcare providers to the possibility of a myocardial infarction. Contextually, pleuritic pain usually indicates a problem in the lungs or pleura rather than the heart and is often associated with conditions such as pleurisy or pulmonary embolism. Calf pain could suggest deep vein thrombosis or other vascular issues, rather than a cardiac event. Radiation of pain to the back may occur in some cardiac conditions, but it is less typical and not as strongly associated with myocardial infarction as the combination of diaphoresis, nausea, and vomiting, which are classic symptoms of a heart attack. Therefore, the combination of symptoms presented in the correct answer is more directly linked to the acute coronary syndrome that characterizes a myocardial infarction.

## 9. What does a CTA Chest primarily evaluate?

- A. Pulmonary Embolism**
- B. Cystic Fibrosis**
- C. Lung Cancer**
- D. Pneumonia**

A CTA (Computed Tomography Angiography) of the chest is primarily utilized to evaluate for pulmonary embolism, which is a blockage in one of the pulmonary arteries in the lungs usually caused by blood clots that travel to the lungs from the legs or other parts of the body (deep vein thrombosis). This imaging technique is highly sensitive and specific for detecting vascular occlusion and examines the blood vessels in great detail, allowing healthcare providers to confirm or rule out pulmonary embolism effectively. While the other conditions listed — cystic fibrosis, lung cancer, and pneumonia — can also be assessed using CT imaging, they are not the primary indications for a CTA. Cystic fibrosis primarily affects the airways and lungs, which would be better evaluated with a standard chest CT or other imaging focusing on lung parenchyma. Lung cancer screening typically involves low-dose lung CT rather than a CTA, as it focuses on identifying nodules and masses rather than vascular structures. Pneumonia can also be diagnosed with standard chest X-rays or CT scans, but these do not specifically evaluate the blood vessels of the lungs like a CTA does. Hence, pulmonary embolism stands out as the primary focus of a CTA chest.

## 10. In which condition would you expect to find increased calor?

- A. URI**
- B. Streptococcal Pharyngitis**
- C. Otitis Media**
- D. Inflammation or infection**

Increased calor, or increased warmth in an area of the body, is commonly associated with inflammation or infection. This phenomenon is part of the body's natural response to these conditions. When inflammation occurs, blood flow to the affected area increases, resulting in a sensation of heat or warmth. This increase in temperature is due to the body's efforts to mobilize immune cells and deliver nutrients necessary for healing. In the context of the other conditions listed, while they may be associated with some level of inflammation, the general characteristic of increased warmth is most prominently observed in cases of widespread inflammation or systemic infection. For instance, a respiratory tract infection may cause local warmth due to inflammation but would not be as consistently recognized for systemic calor increases as a broad inflammatory response seen in various infections. Thus, the response of increased calor is most representative of a broader inflammatory or infectious process.

# 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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://scribeamericaemergencyroom.examzify.com>**

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

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