

St. John Ambulance First Aid Practice Exam (Sample)

Study Guide



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Questions

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- 1. What does the term "secondary survey" entail?**
 - A. A detailed assessment of vital signs only**
 - B. A systematic approach to identifying other injuries after addressing life-threatening conditions**
 - C. Checking for allergies and medical history**
 - D. Assessing the environment for safety**
- 2. What is the first action to take when approaching an unconscious patient?**
 - A. Ensure the scene is safe and check for responsiveness**
 - B. Call for emergency services**
 - C. Check for signs of breathing**
 - D. Move the patient to a safer location**
- 3. When should you not use a tourniquet?**
 - A. For minor wounds that do not bleed**
 - B. Unless there is life-threatening bleeding and direct pressure is not effective**
 - C. If the wound is on a limb**
 - D. When the person is conscious**
- 4. What are the common signs of a heart attack?**
 - A. Chest pain or discomfort**
 - B. Swelling of limbs**
 - C. Persistent headache**
 - D. Extreme fatigue**
- 5. How often should you reassess a patient's breathing during CPR?**
 - A. Every minute**
 - B. Every 2 minutes**
 - C. Every 5 minutes**
 - D. Every 10 seconds**

- 6. What are the two types of frostbite?**
- A. Superficial frostbite and deep frostbite**
 - B. Minor frostbite and major frostbite**
 - C. Partial frostbite and complete frostbite**
 - D. Cold-induced frostbite and heat-induced frostbite**
- 7. Which condition is characterized by high body temperature and confusion?**
- A. Heat cramps**
 - B. Heat exhaustion**
 - C. Heatstroke**
 - D. Heat fatigue**
- 8. Which action is discouraged for someone administering First Aid?**
- A. Talking to the casualty to assess their condition**
 - B. Using personal protective equipment when necessary**
 - C. Assuming responsibility for all medical decisions**
 - D. Recording any changes in the casualty's condition**
- 9. Which symptom could indicate complications from internal bleeding?**
- A. Increased thirst**
 - B. Nausea and vomiting**
 - C. Difficulty in breathing**
 - D. Lightheadedness or fainting**
- 10. What is the primary purpose of a first aid kit?**
- A. To treat minor cuts and bruises**
 - B. To provide essential supplies for treating injuries or illnesses**
 - C. To store emergency medications only**
 - D. To clean the wound area**

Answers

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

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Explanations

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1. What does the term "secondary survey" entail?

- A. A detailed assessment of vital signs only
- B. A systematic approach to identifying other injuries after addressing life-threatening conditions**
- C. Checking for allergies and medical history
- D. Assessing the environment for safety

The term "secondary survey" refers to a thorough and systematic assessment that is conducted after initial life-threatening conditions have been addressed during first aid treatment. This assessment focuses on identifying other potential injuries or illnesses that may not have been immediately apparent. During the secondary survey, the rescuer evaluates head-to-toe for injuries, asks the patient about their symptoms, and gathers pertinent medical history, thereby providing a comprehensive understanding of the patient's condition. This step is crucial for effective treatment, as it ensures that all injuries or medical issues are recognized and managed appropriately. While assessing vital signs, checking for allergies, or ensuring a safe environment are all important parts of the overall first aid process, they do not encompass the full scope and purpose of the secondary survey. The secondary survey is specifically designed to follow the primary survey and address any additional medical concerns, making option B the most accurate description of the term.

2. What is the first action to take when approaching an unconscious patient?

- A. Ensure the scene is safe and check for responsiveness**
- B. Call for emergency services
- C. Check for signs of breathing
- D. Move the patient to a safer location

When approaching an unconscious patient, the first action is to ensure that the scene is safe and check for responsiveness. This initial step is crucial for the safety of both the rescuer and the patient. Assessing the safety of the scene prevents further injury or complications from occurring, whether they are environmental hazards or the presence of other unconscious individuals. Once the scene is confirmed as safe, checking for responsiveness involves gently shaking the patient and calling out to them. This helps to determine the level of consciousness. If the patient does not respond, the situation may require further action, such as the assessment of breathing or calling for emergency services. Taking this step first prioritizes your safety and the safety of others while gathering important information about the patient's condition. Only after ensuring safety and responsiveness should further steps, like calling emergency services or checking for breathing, be taken.

3. When should you not use a tourniquet?

A. For minor wounds that do not bleed

B. Unless there is life-threatening bleeding and direct pressure is not effective

C. If the wound is on a limb

D. When the person is conscious

A tourniquet is a medical device used to control bleeding, especially in situations where there is life-threatening hemorrhaging that cannot be controlled by direct pressure. The use of a tourniquet is a critical intervention that can save lives, but it is important to use it judiciously and under the right circumstances. The correct response highlights that a tourniquet should only be employed if there is life-threatening bleeding and when other methods, such as applying direct pressure, have failed. This is due to the fact that while tourniquets can be life-saving, they can also cause complications if used improperly. Using a tourniquet on minor wounds or when bleeding is not severe can result in unnecessary discomfort and damage to tissues, potentially leading to more serious complications. Therefore, reserving tourniquets for extreme situations is crucial to ensure they are used effectively and safely. In summary, utilizing a tourniquet should be a carefully considered decision, only taken when absolutely necessary, to manage severe and uncontrollable bleeding. This principle helps guide first responders in making appropriate choices regarding the application of such a significant and impactful intervention.

4. What are the common signs of a heart attack?

A. Chest pain or discomfort

B. Swelling of limbs

C. Persistent headache

D. Extreme fatigue

Chest pain or discomfort is indeed a common sign of a heart attack and is often the most recognized symptom. The pain can manifest as a feeling of pressure, squeezing, fullness, or aching in the center or left side of the chest. This discomfort may also radiate to the arms, back, neck, jaw, or stomach. Recognizing this symptom is crucial because it can indicate that the heart is not receiving enough oxygen-rich blood, which may signify a blockage in one or more coronary arteries. While swelling of limbs, persistent headache, and extreme fatigue can be associated with various health issues, they are not typically recognized as primary signs of a heart attack. Swelling may indicate fluid retention or other conditions, persistent headache could be linked to tension or migraine, and while extreme fatigue can occur, it is often more nonspecific and may not directly correlate with the acute symptoms of a heart attack like chest pain or discomfort does.

Understanding the primary signs allows for quicker recognition and response, which can be vital for effective first aid and treatment.

5. How often should you reassess a patient's breathing during CPR?

- A. Every minute**
- B. Every 2 minutes**
- C. Every 5 minutes**
- D. Every 10 seconds**

Reassessing a patient's breathing during CPR is crucial for monitoring their condition and ensuring that the resuscitation efforts are effective. The recommended interval for reassessment is every 2 minutes. This allows enough time for the CPR provider to adequately perform chest compressions and rescue breaths while also ensuring that they check for any signs of improvement or deterioration in the patient's condition. Checking every 2 minutes aligns with the guidelines that emphasize high-quality CPR, which includes continuous compressions and ventilation adjustments as needed. This interval balances the necessity of frequent checks with the need to maintain the rhythm of CPR, allowing for a thorough assessment without excessive interruptions. Reassessing too frequently, such as every minute or every 10 seconds, can disrupt the flow of chest compressions and reduce their overall effectiveness. It is essential to give the compressions time to circulate oxygenated blood and reassess within a frame that maintains the rhythm of CPR while still allowing for vital checks on the patient's status.

6. What are the two types of frostbite?

- A. Superficial frostbite and deep frostbite**
- B. Minor frostbite and major frostbite**
- C. Partial frostbite and complete frostbite**
- D. Cold-induced frostbite and heat-induced frostbite**

The two types of frostbite are classified as superficial frostbite and deep frostbite. Superficial frostbite affects only the outer layers of the skin, typically causing numbness, tingling, and a pale appearance to the skin. It is often reversible with prompt warming and proper care. On the other hand, deep frostbite extends beyond the skin into underlying tissues, such as muscle and bone. This more severe form can lead to permanent damage and may necessitate medical treatment to prevent complications, such as infection or even amputation. The other classifications, such as minor and major frostbite or partial and complete frostbite, do not reflect the medical terminology used to describe the varying depths of skin and tissue damage. Likewise, cold-induced and heat-induced frostbite is misleading, as frostbite specifically results from exposure to extreme cold, while heat-induced conditions relate to heat exhaustion or heat stroke.

7. Which condition is characterized by high body temperature and confusion?

- A. Heat cramps**
- B. Heat exhaustion**
- C. Heatstroke**
- D. Heat fatigue**

The condition characterized by high body temperature and confusion is heatstroke. This is a serious medical emergency that occurs when the body's temperature regulation fails, causing the body temperature to rise to dangerous levels, typically above 104°F (40°C). In heatstroke, the body is unable to cool itself through sweating, and can lead to severe complications, including damage to the brain and other vital organs. The confusion experienced during heatstroke is due to the effect of elevated body temperature on the brain. This mental status change can manifest as agitation, confusion, or even loss of consciousness, signaling that immediate medical intervention is required. Heat cramps, heat exhaustion, and heat fatigue each present with different symptoms and severity levels. While heat cramps involve muscle spasms and are usually not accompanied by confusion, heat exhaustion may lead to weakness and fainting but does not typically result in such high body temperature or confusion. Heat fatigue, while representing milder symptoms of heat exposure, also does not reach the level of severity seen in heatstroke.

8. Which action is discouraged for someone administering First Aid?

- A. Talking to the casualty to assess their condition**
- B. Using personal protective equipment when necessary**
- C. Assuming responsibility for all medical decisions**
- D. Recording any changes in the casualty's condition**

Assuming responsibility for all medical decisions is discouraged because first aid providers are trained to give immediate assistance within the scope of their training, rather than taking full control over the casualty's medical care. In an emergency, the role of a first aider is to provide initial support, stabilize the casualty, and prepare them for professional medical help to take over. This approach ensures that the first aider does not exceed their training or legal authority, which is essential in protecting both the casualty's wellbeing and the responder from potential liability. In the context of the other options, talking to the casualty to assess their condition is vital for understanding their needs and ensuring effective care. Using personal protective equipment is a standard and important practice to ensure the safety of both the first aider and the casualty. Recording changes in the casualty's condition is a crucial step in monitoring their status and providing accurate information to emergency services when they arrive. Each of these actions aligns with best practices in first aid and supports the overall goal of providing safe and effective care.

9. Which symptom could indicate complications from internal bleeding?

- A. Increased thirst**
- B. Nausea and vomiting**
- C. Difficulty in breathing**
- D. Lightheadedness or fainting**

Lightheadedness or fainting can indeed indicate complications from internal bleeding due to the body's response to significant blood loss. When internal bleeding occurs, it can result in reduced blood volume, which may lead to decreased oxygen delivery to the brain and other vital organs. This can cause a person to feel lightheaded or faint, especially when standing up or moving quickly, as their body struggles to maintain adequate blood pressure and circulation. In severe cases, the loss of blood volume can disrupt the body's ability to perfuse tissues effectively, resulting in symptoms of shock. This clinical picture is characterized by pallor, increased heart rate, and weakness, along with feelings of lightheadedness or faintness. Prompt recognition of these symptoms is crucial in first aid as it may necessitate immediate medical intervention to address the internal bleeding and stabilize the individual.

10. What is the primary purpose of a first aid kit?

- A. To treat minor cuts and bruises**
- B. To provide essential supplies for treating injuries or illnesses**
- C. To store emergency medications only**
- D. To clean the wound area**

The primary purpose of a first aid kit is to provide essential supplies for treating a variety of injuries or illnesses. This means it encompasses a wide range of items that can be utilized in different situations, such as bandages, antiseptics, gauze, and tools for CPR, along with medications that may be necessary in emergency situations. While treating minor cuts and bruises, storing emergency medications, and cleaning wound areas are important functions, they represent specific types of care rather than the overall objective of a first aid kit. The kit is designed to be comprehensive, ensuring that individuals are equipped to handle various first aid scenarios effectively.