

# Swift River ER 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

- 1. When is a CT scan preferred over an X-ray in trauma patients?**
  - A. For evaluating bone fractures**
  - B. For assessing patient mobility**
  - C. For detailed visualization of internal injuries and bleeding**
  - D. For checking for foreign bodies**
- 2. What is a primary concern for a patient diagnosed with croup?**
  - A. Airway obstruction due to swelling**
  - B. Severe dehydration**
  - C. High blood sugar levels**
  - D. Muscle spasms**
- 3. What is the acuity level for a 23-year-old female presenting with dysuria for three days without fever?**
  - A. Acuity 2**
  - B. Acuity 4**
  - C. Acuity 3**
  - D. Acuity 1**
- 4. What symptoms did Sean Torres report?**
  - A. Abdominal pain**
  - B. Weakness and headache**
  - C. Pain in foot**
  - D. Severe poison ivy**
- 5. In the context of emergency assessment, what does an acuity level of 5 indicate?**
  - A. Immediate and life-threatening condition**
  - B. Stable condition requiring monitoring**
  - C. Non-urgent but requiring attention**
  - D. Very minor issue with no treatment needed**

- 6. How do you differentiate between a sprain and a fracture?**
- A. By assessing for swelling, deformity, and the range of motion**
  - B. By using an X-ray exclusively**
  - C. By checking for the presence of bruising only**
  - D. By evaluating the level of pain**
- 7. In the case of a gunshot wound to the neck, what is the acuity level of the patient described?**
- A. Acuity 1**
  - B. Acuity 2**
  - C. Acuity 3**
  - D. Acuity 4**
- 8. What is the acuity level for a 60-year-old homeless male who has visited the ED multiple times and currently presents with a rash on lower extremities but stable vitals?**
- A. Acuity 1**
  - B. Acuity 3**
  - C. Acuity 4**
  - D. Acuity 5**
- 9. What were the vital signs of Deborah Saunders, the patient suffering from influenza?**
- A. Stable but elevated temperature**
  - B. High blood pressure and normal heart rate**
  - C. Elevated temperature and low heart rate**
  - D. Normal temperature and elevated heart rate**
- 10. What should the nurse assess first in a patient with suspected septic shock?**
- A. Neurological status**
  - B. Vital signs and perfusion status**
  - C. History of allergies**
  - D. Past medical history**



## **Answers**

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

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## **Explanations**

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**1. When is a CT scan preferred over an X-ray in trauma patients?**

- A. For evaluating bone fractures**
- B. For assessing patient mobility**
- C. For detailed visualization of internal injuries and bleeding**
- D. For checking for foreign bodies**

A CT scan is preferred over an X-ray in trauma patients primarily for its ability to provide detailed visualization of internal injuries and bleeding. This detailed imaging is crucial in trauma cases where internal organs may be damaged, and it can help identify conditions such as hemorrhaging, organ lacerations, or other subtle injuries that might not be visible on an X-ray. While X-rays can be useful for detecting some types of fractures, they are limited in their capability to assess complex structures and soft tissue injuries. The CT scan, with its cross-sectional views and ability to create three-dimensional images, allows for a comprehensive assessment of the entire area of concern, making it an indispensable tool in emergency settings. In cases involving patient mobility or foreign body detection, other methods may be more appropriate or sufficient than a CT scan. Thus, the primary advantage of the CT scan in trauma scenarios is its exceptional capacity to provide detailed insights into the body's internal injuries, guiding effective treatment decisions.

**2. What is a primary concern for a patient diagnosed with croup?**

- A. Airway obstruction due to swelling**
- B. Severe dehydration**
- C. High blood sugar levels**
- D. Muscle spasms**

A primary concern for a patient diagnosed with croup is airway obstruction due to swelling. Croup typically results from a viral infection that leads to inflammation in the upper airways, particularly the larynx and trachea. This inflammation can cause narrowing of the airway, leading to difficulty breathing, stridor (a high-pitched wheezing sound), and potential respiratory distress. It's critical to monitor these patients because airway obstruction can quickly escalate and lead to significant complications. The treatment often focuses on reducing this inflammation with corticosteroids and ensuring the airway remains open, emphasizing the importance of addressing the risk of airway obstruction promptly. Other concerns such as severe dehydration, high blood sugar levels, and muscle spasms are not typically associated with croup, making airway obstruction the most pressing issue in this diagnosis.

**3. What is the acuity level for a 23-year-old female presenting with dysuria for three days without fever?**

- A. Acuity 2**
- B. Acuity 4**
- C. Acuity 3**
- D. Acuity 1**

When assessing a patient presenting with dysuria for three days without fever, it is essential to consider the acuity level based on the urgency of their condition and the potential need for immediate medical intervention. In this scenario, dysuria (painful urination) can often indicate a urinary tract infection (UTI) or other non-life-threatening conditions. The absence of fever suggests that there is no acute systemic infection or severe illness present, which typically raises the acuity level. Acuity levels help healthcare providers prioritize patient care in emergency settings, with lower numbers indicating a higher level of urgency. When categorizing the 23-year-old female in this scenario, an acuity level of 4 is appropriate. This indicates she is stable, and while she requires care, it is not urgent. She can await treatment without immediate risk to her health. The choice of acuity level reflects both the specific symptoms presented and the overall clinical context. This patient likely needs a standard evaluation and treatment for dysuria but is not in a critical situation requiring immediate intervention. Therefore, acuity 4 accurately reflects her condition.

**4. What symptoms did Sean Torres report?**

- A. Abdominal pain**
- B. Weakness and headache**
- C. Pain in foot**
- D. Severe poison ivy**

The correct answer reflects the specific symptoms that Sean Torres reported directly related to his condition. Abdominal pain is a common complaint that can indicate various underlying issues, ranging from gastrointestinal problems to more serious conditions that may require immediate medical attention. This symptom is significant in an emergency setting, as it can help healthcare providers narrow down the potential diagnoses and determine the appropriate course of action. In contrast, other options represent symptoms that may not be relevant to the case or do not align with what Sean Torres specifically reported. While weakness and headache can indeed be concerning, they are not highlighted as his primary issues in this scenario. Pain in the foot and reactions like severe poison ivy would generally point to different medical situations rather than being central to Sean's reported condition. Thus, the focus on abdominal pain illustrates its importance in evaluating Sean's overall health status and guiding the treatment approach.

**5. In the context of emergency assessment, what does an acuity level of 5 indicate?**

- A. Immediate and life-threatening condition**
- B. Stable condition requiring monitoring**
- C. Non-urgent but requiring attention**
- D. Very minor issue with no treatment needed**

In the context of emergency assessment, an acuity level of 5 indicates a very minor issue with no treatment needed. This categorization typically reflects cases where the patient does not have a serious or urgent medical condition, allowing for longer wait times. These cases might involve minor injuries or concerns that, while still worthy of consideration, do not require immediate medical attention. Understanding the acuity scale is essential for prioritizing patient care in a clinical environment. The scale generally ranges from 1 to 5, with 1 being the most urgent, often indicating life-threatening situations that need immediate intervention. As the levels increase, so does the stability and severity of the condition, with 5 representing the least urgent needs. This categorization ensures that healthcare resources are allocated effectively, allowing healthcare professionals to focus on more severe cases that require immediate care. Therefore, recognizing that an acuity level of 5 signifies a very minor issue helps clarify the triage process and the importance of prioritizing patients based on the severity of their conditions.

**6. How do you differentiate between a sprain and a fracture?**

- A. By assessing for swelling, deformity, and the range of motion**
- B. By using an X-ray exclusively**
- C. By checking for the presence of bruising only**
- D. By evaluating the level of pain**

The correct choice focuses on assessing various physical signs and symptoms such as swelling, deformity, and the range of motion, which are critical in differentiating between a sprain and a fracture. Sprains involve the stretching or tearing of ligaments, often resulting in swelling and pain in the affected area, but bones remain intact. You might observe localized swelling and possibly a reduced range of motion due to pain or instability. Fractures, on the other hand, involve a break in the bone, which can lead to deformity, significant swelling, and often more severe pain. Limited range of motion is also observed, but usually accompanied by other signs like abnormal positioning or even visible bone. Using an X-ray exclusively could miss some nuances in soft tissue injuries that might suggest a sprain rather than a fracture. Checking only for bruising offers an incomplete picture, as bruising can occur in both conditions and doesn't definitively indicate a fracture or sprain. Evaluating the level of pain alone is also not sufficient since both injuries can cause significant pain, making it hard to distinguish between them based solely on discomfort. Therefore, the most effective approach to differentiate between these two injuries involves a comprehensive assessment of the physical signs and symptoms, which is why

**7. In the case of a gunshot wound to the neck, what is the acuity level of the patient described?**

- A. Acuity 1**
- B. Acuity 2**
- C. Acuity 3**
- D. Acuity 4**

A gunshot wound to the neck is considered an extremely serious injury that typically falls under the highest acuity level due to the potential for life-threatening complications. The neck houses vital structures, including major blood vessels (the carotid arteries and jugular veins), the trachea, the esophagus, and the spinal cord. An injury in this region can lead to significant blood loss, airway compromise, and neurological deficits, which require immediate medical attention. Acuity levels are often categorized based on the immediacy of care required, and a gunshot wound usually encompasses a scenario where the patient's life is at risk. Given the potential for rapid deterioration, the patient would need to be evaluated and treated without delay, thus supporting the classification of acuity level 1. This distinction indicates a critical condition necessitating urgent intervention, which is aligned with the needs of a patient sustaining such an injury in the neck area. Other acuity levels denote varying degrees of seriousness; for instance, level 2 may involve serious but not immediately life-threatening issues, while levels 3 and 4 would pertain to less urgent cases, making them unsuitable for this scenario.

**8. What is the acuity level for a 60-year-old homeless male who has visited the ED multiple times and currently presents with a rash on lower extremities but stable vitals?**

- A. Acuity 1**
- B. Acuity 3**
- C. Acuity 4**
- D. Acuity 5**

The acuity level assigned to a patient is determined by the severity of their condition and the need for immediate medical intervention. In this case, the 60-year-old homeless male presenting with a rash on his lower extremities, along with stable vital signs, indicates a less critical situation. When assessing acuity levels, a lower number signifies a more severe condition that requires immediate attention. Acuity level 5 typically denotes a non-emergency situation, often relating to minor issues or discomfort that do not pose an immediate threat to life or require urgent intervention. Since this patient is stable and presenting with a rash, which is likely not life-threatening, he would fit into this category. Recognizing the overall health status, the background of repeated visits to the Emergency Department, and the fact that the patient's vitals are stable leads to the conclusion that his current presentation does not constitute a high level of acuity, validating the choice of acuity level 5.

**9. What were the vital signs of Deborah Saunders, the patient suffering from influenza?**

- A. Stable but elevated temperature**
- B. High blood pressure and normal heart rate**
- C. Elevated temperature and low heart rate**
- D. Normal temperature and elevated heart rate**

The vital signs indicating a stable but elevated temperature for Deborah Saunders, who is suffering from influenza, align with the typical physiological response seen during respiratory infections. Influenza often leads to fever as the body mounts an immune response to fight off the viral infection. An elevated temperature indicates that the body is working to combat the illness, which is a common symptom when experiencing influenza. In this case, stating that the vital signs are stable emphasizes that while there is an elevated temperature, other vital signs like heart rate and blood pressure are within expected ranges, indicating that the patient is not in acute distress. This combination of a stable condition along with an elevated temperature is crucial in understanding the typical presentations of viral infections like influenza. Options that refer to high blood pressure, low heart rate, or normal temperature with an elevated heart rate do not reflect the expected clinical picture in a patient with influenza, where fever is a hallmark sign, and the heart rate may be increased as a compensatory mechanism rather than decreased. This makes the first option the most accurate representation of the situation.

**10. What should the nurse assess first in a patient with suspected septic shock?**

- A. Neurological status**
- B. Vital signs and perfusion status**
- C. History of allergies**
- D. Past medical history**

In patients with suspected septic shock, assessing vital signs and perfusion status is crucial as it provides immediate insights into the patient's hemodynamic stability. Septic shock is characterized by persistent hypotension and signs of inadequate tissue perfusion due to systemic infection. Monitoring vital signs, including blood pressure, heart rate, respiratory rate, and temperature, helps to evaluate the severity of shock and the body's response to the infection. Additionally, assessing perfusion status through indicators such as skin temperature, capillary refill time, and urine output helps determine how well the body's organs are being supplied with blood and oxygen. While neurological status is important to assess in the overall evaluation of a patient, it comes after establishing vital signs and the current hemodynamic state of the patient, as these can directly impact the neurological function. Similarly, a patient's history of allergies or past medical history, while significant for tailoring treatment, are not immediate priorities in the acute setting of suspected septic shock. The primary focus during a suspected emergency such as this is to stabilize the patient's vital signs and ensure adequate perfusion.



## 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://swiftriverer.examzify.com>**

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