

SWIFT RIVER ER PRACTICE EXAM (SAMPLE)

STUDY GUIDE



Prepare with structure. Pass with confidence



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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. What is the acuity level of a 44-year-old female presenting with amenorrhea for five months but with stable vital signs?**
 - A. Acuity 1
 - B. Acuity 2
 - C. Acuity 4
 - D. Acuity 5

- 2. A 45-year-old male with a blood alcohol level of 234 arrives at the ED. What is the acuity level for this patient?**
 - A. Acuity 1
 - B. Acuity 2
 - C. Acuity 3
 - D. Acuity 4

- 3. If a patient is conscious and alert but has severe pain, what acuity might they likely be assigned?**
 - A. Acuity 1
 - B. Acuity 2
 - C. Acuity 3
 - D. Acuity 4

- 4. What was indicated for the treatment of the 50-year-old patient with DM II presenting with inability to see out of the right eye?**
 - A. Surgery
 - B. Referral to ophthalmology
 - C. Immediate medication
 - D. Observation

- 5. What key piece of information is essential to gather during a patient's primary survey?**
 - A. Medication history
 - B. Mechanism of injury or chief complaint
 - C. Patient's physical examination results
 - D. Family medical history

- 6. What is the acuity level of Sara Simpson, who is experiencing vomiting blood?**
- A. Acuity 1
 - B. Acuity 3
 - C. Acuity 4
 - D. Acuity 2
- 7. What is the acuity level for a 23-year-old female with low-grade fever and malaise?**
- A. Acuity 2
 - B. Acuity 3
 - C. Acuity 4
 - D. Acuity 1
- 8. What is the purpose of using a tourniquet in traumatic bleeding?**
- A. To enhance blood circulation
 - B. To control severe arterial bleeding
 - C. To relieve pressure on the wound
 - D. To improve wound healing
- 9. What is the significance of the vital signs for determining the acuity level in emergency medicine?**
- A. They provide a baseline for all patients
 - B. They help assess the urgency of the condition
 - C. They are only important for trauma cases
 - D. They have no significance
- 10. What complaint does Ruth Bailey, the 38-year-old woman, have?**
- A. Severe chest pain
 - B. Severe lower back pain
 - C. Weight loss
 - D. Dog bite

Answers

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

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Explanations

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1. What is the acuity level of a 44-year-old female presenting with amenorrhea for five months but with stable vital signs?

- A. Acuity 1
- B. Acuity 2
- C. Acuity 4**
- D. Acuity 5

In evaluating the acuity level of a patient, it is important to consider the severity of the presenting condition and the stability of the patient's vital signs. In this case, the patient is a 44-year-old female experiencing amenorrhea for five months, which indicates a cessation of menstrual periods. Although this condition can have several underlying causes, including hormonal imbalances or stress, the key factor here is that the patient has stable vital signs. Stable vital signs typically suggest that the patient is not in immediate distress and does not require urgent intervention. Acuity levels classify patients based on their need for immediate medical attention. Acuity level 4 generally indicates a less urgent situation, where the patient may require evaluation and care, but the condition is not life-threatening and does not necessitate immediate action. Given the stable condition of the patient alongside the concern of amenorrhea, this aligns with a lower acuity level, like 4, as there is no critical or life-threatening issue present. By contrast, higher acuity levels, such as level 1 or level 2, are assigned to patients who are critically ill or in need of immediate care. Lower acuity levels, such as 5, pertain to non-urgent cases

2. A 45-year-old male with a blood alcohol level of 234 arrives at the ED. What is the acuity level for this patient?

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

The acuity level for this patient, who has a blood alcohol level of 234, would be classified primarily based on the risk of acute alcohol intoxication and its potential complications. A blood alcohol level above 200 mg/dL indicates a significant level of intoxication, which poses risks of respiratory depression, loss of consciousness, and even coma. In this scenario, categorizing the acuity level as level 3 suggests that while the patient is not in immediate life-threatening danger, they do require urgent evaluation and intervention due to the moderate severity of their condition. This level indicates that the patient can wait a short time (typically up to 30 minutes) without an immediate risk to life, but they are still at a degree of medical urgency that warrants prompt attention. The other acuity levels would indicate either a greater urgency requiring immediate care (level 1) or a less urgent concern (levels 2 and 4) where the risk is not as pronounced. Thus, given the elevated blood alcohol content and the potential for serious complications, an acuity level of 3 is justified for this patient.

3. If a patient is conscious and alert but has severe pain, what acuity might they likely be assigned?

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

A conscious and alert patient experiencing severe pain would typically be assigned an acuity level of 2. This level indicates that the patient is in distress but is still stable. Acuity levels in emergency settings help prioritize patient care based on the urgency of the condition. Acuity 1 signifies a life-threatening situation requiring immediate intervention, such as cardiac arrest or severe trauma. This is not the case here, as the patient is conscious and aware. Acuity 3 generally indicates a less urgent situation, such as a non-severe but concerning medical issue. Acuity 4 would pertain to stable patients with minor issues. Since the patient has severe pain, this points to a need for prompt assessment and management but not immediate life-saving interventions, making acuity 2 appropriate. This reflects the need for timely care to address the patient's significant pain while recognizing their overall stability.

4. What was indicated for the treatment of the 50-year-old patient with DM II presenting with inability to see out of the right eye?

- A. Surgery
- B. Referral to ophthalmology**
- C. Immediate medication
- D. Observation

In the case of a 50-year-old patient with diabetes mellitus type II who presents with an inability to see out of one eye, a referral to ophthalmology is the most appropriate course of action. This condition can be a sign of serious eye issues commonly associated with diabetes, such as diabetic retinopathy, retinal detachment, or other acute ocular conditions that require specialized assessment and intervention. Ophthalmologists have the expertise to conduct a thorough examination, which may include visual acuity tests, fundoscopic examinations, and imaging studies necessary to determine the underlying cause of the vision loss. They can then provide appropriate treatment options based on their findings, which could range from medical management to surgical interventions, depending on the specific condition diagnosed. While immediate medication or surgery may be necessary in certain urgent situations, the decision to treat with these options should be guided by a comprehensive evaluation by an eye specialist. Observation alone would not be appropriate given the urgent nature of sudden vision loss, especially in a patient with a history of diabetes, where early intervention can be critical in preventing permanent damage.

5. What key piece of information is essential to gather during a patient's primary survey?

- A. Medication history
- B. Mechanism of injury or chief complaint**
- C. Patient's physical examination results
- D. Family medical history

Gathering the mechanism of injury or chief complaint during a patient's primary survey is crucial because it provides immediate insight into the patient's condition and guides the priorities for medical care. The primary survey is designed to quickly assess life-threatening issues and determine the most critical areas requiring intervention. Understanding how the injury occurred or what the chief complaint is helps healthcare professionals establish the urgency of the situation, anticipate potential complications, and make informed decisions about further assessments and interventions. In emergency settings, time is of the essence, and knowing the mechanism of injury can indicate what types of injuries may be present, prompting necessary evaluations, such as imaging studies or laboratory tests. This focus allows medical personnel to stabilize the patient effectively and address the most pressing concerns swiftly. The other options, while important in their own right, are more relevant in secondary assessments or follow-up care rather than the immediate primary survey. For instance, medication history and family medical history contribute to a comprehensive understanding of the patient, but they are not as immediately critical in evaluating acute situations. A thorough physical examination is also vital but typically follows the initial assessment of life-threatening conditions.

6. What is the acuity level of Sara Simpson, who is experiencing vomiting blood?

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

In evaluating the acuity level of a patient experiencing vomiting blood, it is essential to consider the potential severity of the condition. Vomiting blood, known as hematemesis, can be indicative of a critical situation, such as gastrointestinal bleeding, which may require immediate medical attention. Acuity levels serve to classify patients based on the urgency of their medical needs, with lower numbers representing higher acuity and greater urgency. In this case, an acuity level of 2 suggests a significant concern that necessitates prompt evaluation and treatment but is not immediately life-threatening. While vomiting blood signals a serious issue, it doesn't automatically classify the patient as the highest acuity level because it may be manageable with timely intervention. This understanding allows healthcare providers to prioritize care effectively, ensuring that those with the most urgent needs are addressed promptly while still recognizing that the patient should be treated quickly due to the potential for complications. In contrast, an acuity level of 1 would apply to a critically unstable patient requiring immediate resuscitation, which is not specified here. Other acuity levels, such as 3 and 4, indicate lower priorities and less urgent conditions, making them less appropriate for a patient experiencing such alarming symptoms. Thus, an acuity level

7. What is the acuity level for a 23-year-old female with low-grade fever and malaise?

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

In this scenario, a 23-year-old female presenting with low-grade fever and malaise would typically indicate a non-life-threatening condition. Acuity levels in emergency settings are used to quickly assess the urgency and severity of a patient's health issues. Acuity level 4 generally represents a situation where the patient's condition is stable and does not require immediate medical intervention. Symptoms such as low-grade fever and malaise often suggest a viral infection or mild illness, which, while they may require further evaluation or treatment, typically do not pose an immediate risk to life or significant function. This aligns with the characteristics of acuity level 4, where the patient's condition can be managed in a less urgent manner compared to higher acuity levels. Recognizing the signs of less severe health issues allows healthcare providers to prioritize care based on the severity and urgency, ensuring that critical patients receive attention first while managing less serious cases appropriately.

8. What is the purpose of using a tourniquet in traumatic bleeding?

- A. To enhance blood circulation
- B. To control severe arterial bleeding**
- C. To relieve pressure on the wound
- D. To improve wound healing

Using a tourniquet in cases of traumatic bleeding is specifically intended to control severe arterial bleeding. When a major artery is compromised, such as during a traumatic injury, blood can rapidly exsanguinate, leading to shock or even death. A tourniquet, when applied correctly above the site of injury, exerts direct pressure on the blood vessels, effectively occluding the artery and preventing further blood loss. The purpose of a tourniquet is not to enhance blood circulation, relieve pressure on the wound, or improve wound healing; rather, it is a lifesaving measure implemented to manage acute and life-threatening hemorrhages. The application of a tourniquet halts blood flow and allows time for further medical intervention, which is critical in emergencies. Proper training in the use of tourniquets is essential, as improper application or use of a tourniquet in situations of minor bleeding can lead to complications.

9. What is the significance of the vital signs for determining the acuity level in emergency medicine?

- A. They provide a baseline for all patients
- B. They help assess the urgency of the condition**
- C. They are only important for trauma cases
- D. They have no significance

In emergency medicine, vital signs are crucial for assessing the urgency of a patient's condition. They offer immediate insights into physiological status, indicating how stable or unstable a patient might be. For instance, abnormal readings such as elevated heart rate, low blood pressure, or irregular respiratory patterns can signal that a patient is in distress or at risk of deterioration, thus requiring immediate intervention. Vital signs not only reflect the current state of a patient's health but also aid in triaging patients based on their acuity levels. Those with abnormal vital signs are often prioritized for treatment, as they may represent life-threatening conditions. In emergency settings, rapid recognition of changes in vital signs can guide healthcare providers in making swift decisions regarding the necessity for further tests, treatments, or immediate care. Furthermore, while vital signs are relevant across various medical situations, emphasizing their role solely in trauma cases overlooks their broader importance in all aspects of emergency medicine. They serve as a foundational component of critical assessment in any emergency scenario, reinforcing their significance in determining a patient's acuity level.

10. What complaint does Ruth Bailey, the 38-year-old woman, have?

- A. Severe chest pain
- B. Severe lower back pain**
- C. Weight loss
- D. Dog bite

Ruth Bailey's primary complaint is severe lower back pain. This aligns with common presentations in emergency medicine, where lower back pain can be indicative of various underlying issues, such as muscle strain, herniated discs, or in some cases, more serious conditions like kidney problems or infections. Lower back pain can significantly affect a patient's quality of life and ability to perform daily activities, making it a serious concern that often leads individuals to seek emergency care. Factors such as the intensity and duration of the pain, any associated symptoms, and the patient's medical history need to be thoroughly assessed to determine the appropriate course of action. Addressing lower back pain would typically involve both pain management and an investigation into the root cause, considering it can stem from a wide range of conditions.

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://swiftriverer.examzify.com>

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

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