INTERNATIONAL TRAUMA LIFE SUPPORT (ITLS) PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://intltraumalifesupport.examzify.com

Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright 1

Table of Contents 2

Introduction 3

How to Use This Guide 4

Questions 5

Answers 8

Explanations 10

Next Steps 16

SAMPLE

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.

SAMPLE

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!

SAMPLE

Questions

SAMPLE

1. What is the Parkland formula used to calculate?

A. The amount of fluid required in 24 hours for burn patients
B. The amount of medication required for a patient
C. The estimated time for recovery from a burn injury
D. The depth of burn injuries in patients

2. What is the target ETCO2 level during hyperventilation?

A. 20-25 mmHg
B. 30-35 mmHg
C. 40-45 mmHg
D. 50-55 mmHg

3. Which of the following is commonly associated with high space shock?

A. Hemorrhage
B. Cardiac failure
C. Pneumothorax
D. Septicemia

4. What is a key consideration during patient transport in trauma scenarios?

A. Transport the patient feet first
B. Stabilize any identified injuries before transport
C. Allow the patient to sit up for comfort
D. Minimize the use of oxygen

5. What is the definition of 'hypovolemic shock'?

A. Shock resulting from anaphylactic reactions
B. Shock due to respiratory failure
C. Shock resulting from the loss of blood volume
D. Shock caused by severe dehydration

6. Which mechanism of injury indicates a "load and go" situation?

A. Single femur fracture
B. Penetrating wound to abdomen
C. Bilateral femur fractures
D. Minor laceration

SAMPLE

7. Which of the following is an indication for chest decompression?

A. Bradycardia
B. Loss of radial pulse
C. Hyperthermia
D. Unconsciousness

8. Which of the following is a key symptom of cardiogenic shock?

A. Increased heart rate
B. Lower heart rate
C. Cold skin signs
D. High blood pressure

9. Which team member can determine a patient's level of consciousness?

A. Any team member
B. Team leader only
C. Junior team members
D. Nurses only

10. Which of the following is NOT part of the ITLS Primary Survey items?

A. Scene Size-up
B. Initial Assessment
C. Patient transport plan
D. Rapid Trauma Survey or Focused Exam

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What is the Parkland formula used to calculate?

A. The amount of fluid required in 24 hours for burn patients

B. The amount of medication required for a patient

C. The estimated time for recovery from a burn injury

D. The depth of burn injuries in patients

The Parkland formula is specifically designed to calculate the amount of fluid required in the first 24 hours for patients who have sustained burns. This formula is crucial in the management of burn injuries, as it helps healthcare providers determine the appropriate volume of intravenous fluids needed to prevent shock and ensure sufficient tissue perfusion. The formula typically involves calculating 4 mL of lactated Ringer's solution per kilogram of body weight for each percentage of total body surface area burned. This method is particularly vital in initial burn resuscitation, as adequate fluid replacement can significantly impact patient outcomes following severe burns. In contrast, the other options do not pertain to the Parkland formula. Medications and recovery times are managed through different protocols, while the depth of burn injuries is assessed through clinical evaluation rather than a formulaic approach.

2. What is the target ETCO2 level during hyperventilation?

A. 20-25 mmHg

B. 30-35 mmHg

C. 40-45 mmHg

D. 50-55 mmHg

The target ETCO2 level during hyperventilation is aimed at maintaining a carbon dioxide level that is lower than the normal physiological range. The typical normal range for ETCO2 levels in a healthy adult is approximately 35-45 mmHg. During hyperventilation, the goal is to reduce the ETCO2 levels to help manage conditions such as severe respiratory distress or certain types of metabolic acidosis. Setting the target at 30-35 mmHg allows the clinician to effectively decrease the CO2 levels to mitigate the effects of hypercapnia (excessive carbon dioxide in the bloodstream) while still ensuring that the patient does not become overly alkalotic, which can occur if the levels drop too low. This range thus represents an effective balance between reducing CO2 accumulation and avoiding adverse effects associated with excessively low levels of carbon dioxide, such as respiratory alkalosis. The other options are either too low or too high compared to the established target during hyperventilation, highlighting the importance of maintaining a controlled and appropriate level of carbon dioxide in the management of trauma patients.

SAMPLE

3. Which of the following is commonly associated with high space shock?

A. Hemorrhage

B. Cardiac failure

C. Pneumothorax

D. Septicemia

High space shock, often referred to in the context of trauma, is primarily associated with conditions that can lead to significant cardiovascular instability due to changes in the thoracic pressure or volume. Pneumothorax, which is the accumulation of air in the pleural space, can lead to a collapse of the lung and a decrease in venous return to the heart. This reduction in venous return can precipitate high space shock as the cardiovascular system struggles to maintain adequate blood pressure and perfusion. In the case of a tension pneumothorax, air trapped in the pleural space can further compress the mediastinum and vital structures, severely limiting cardiac filling and contributing to shock. This physiological response makes pneumothorax a critical condition in trauma scenarios, where immediate intervention is necessary to avoid life-threatening consequences. The other options, while relevant in the context of various medical emergencies, do not directly align with the mechanisms and pathophysiology of high space shock in the same way that pneumothorax does. Hemorrhage can lead to hypovolemic shock, cardiac failure typically indicates a pre-existing cardiac condition rather than a traumatic event leading to high space shock, and septicemia is linked to systemic infection rather than the acute physiological

4. What is a key consideration during patient transport in trauma scenarios?

A. Transport the patient feet first

B. Stabilize any identified injuries before transport

C. Allow the patient to sit up for comfort

D. Minimize the use of oxygen

Stabilizing any identified injuries before transport is crucial in trauma scenarios due to the need to minimize further harm and prevent worsening of the patient's condition. Proper stabilization can help prevent complications, such as additional bleeding or movement of fractures that could lead to nerve damage or impairment of circulation. When a patient has sustained trauma, they may have multiple types of injuries that can be exacerbated by movement during transport. By ensuring that any critical injuries, particularly those related to the spine, pelvis, or any open wounds, are stabilized, healthcare providers can enhance the safety of the transport process while also maintaining the integrity of any trauma interventions that have already been applied. In contrast, transporting a patient feet first may not be appropriate in many cases, especially if there are spinal injuries. Allowing a patient to sit up may be contrary to the need to maintain spinal alignment and could increase the risk of further injury. Minimizing oxygen use could be detrimental, as trauma patients often require supplemental oxygen to maintain proper oxygenation depending on their injury severity and potential respiratory distress.

SAMPLE

5. What is the definition of 'hypovolemic shock'?

A. Shock resulting from anaphylactic reactions

B. Shock due to respiratory failure

C. Shock resulting from the loss of blood volume

D. Shock caused by severe dehydration

Hypovolemic shock is defined as a condition that arises when there is a significant loss of blood volume, which can be due to various factors including hemorrhage, trauma, or fluid loss due to conditions like severe dehydration. In this situation, the body's ability to maintain adequate perfusion and oxygenation of tissues is compromised. The heart struggles to pump effectively because of the reduced volume of circulating blood, leading to a decrease in blood pressure and affecting the overall function of vital organs. While severe dehydration can lead to a state of hypovolemic shock, it is a specific cause rather than a definition. Anaphylactic reactions fall under a different category called distributive shock, where the blood vessels dilate, causing pooling of blood and inadequate circulation. Similarly, respiratory failure is associated with obstructive or central causes of shock rather than the volume loss seen in hypovolemic shock. Thus, the most accurate definition focuses specifically on the loss of blood volume itself, making it the correct choice.

6. Which mechanism of injury indicates a "load and go" situation?

A. Single femur fracture

B. Penetrating wound to abdomen

C. Bilateral femur fractures

D. Minor laceration

A "load and go" situation refers to a scenario where a patient's condition is critical enough to necessitate immediate transport to a medical facility, rather than spending time on scene providing advanced care. In this context, a mechanism of injury such as bilateral femur fractures signifies significant trauma, often indicative of potential complications like internal bleeding, shock, or other serious injuries. The presence of multiple fractures in the lower limbs can drastically affect the patient's stability and vital signs, highlighting the urgency for rapid transport. In contrast, a single femur fracture, a penetrating wound to the abdomen, and a minor laceration may not inherently warrant such immediate transport. While a penetrating wound to the abdomen can be serious and does require prompt attention, it may not automatically trigger a "load and go" unless accompanied by signs of critical instability. A single femur fracture and a minor laceration typically allow for stabilizing measures to be performed beforehand without jeopardizing the patient's condition, making immediate transport less urgent.

SAMPLE

7. Which of the following is an indication for chest decompression?

A. Bradycardia

B. Loss of radial pulse

C. Hyperthermia

D. Unconsciousness

Chest decompression is a critical procedure performed to relieve pressure in the thoracic cavity, particularly when there is a suspected tension pneumothorax. The presence of a loss of radial pulse is significant in this context, as it often indicates that adequate circulation is compromised, potentially due to increased pressure in the chest. In cases of tension pneumothorax, air accumulates in the pleural space, leading to decreased venous return to the heart and subsequently reduced cardiac output. This results in a marked drop in blood pressure, which can manifest as a loss of peripheral pulses like the radial pulse. When a patient loses a radial pulse, it may signal that life-threatening changes in circulation are occurring, thus necessitating immediate intervention such as chest decompression, which can restore normal pressure in the thoracic cavity, improve venous return, and re-establish circulation. Other options presented do not directly correlate with indications for chest decompression. Bradycardia may relate to various conditions but does not specifically indicate tension pneumothorax. Hyperthermia, while a serious condition, is unrelated to the mechanical pressure issues requiring decompression. Unconsciousness can result from multiple factors, but it does not directly point toward the need for chest decompression in the

8. Which of the following is a key symptom of cardiogenic shock?

A. Increased heart rate

B. Lower heart rate

C. Cold skin signs

D. High blood pressure

In cardiogenic shock, one of the primary physiological responses is a decrease in cardiac output due to the heart's inability to effectively pump blood, often leading to a lower heart rate (bradycardia). This condition can arise from various underlying problems, such as myocardial infarction or other types of heart failure, where the heart's muscle is damaged and unable to maintain adequate circulation. While increased heart rate can sometimes be seen as a compensatory mechanism in other forms of shock or stress, cardiogenic shock often manifests differently. The body's sympathetic nervous system attempts to respond to decreased cardiac output, but if the heart is severely compromised, it may not be able to maintain an elevated heart rate, leading instead to a lower heart rate. Cold skin signs may occur as a result of peripheral vasoconstriction in response to shock, but they are not as definitive a symptom of cardiogenic shock specifically. High blood pressure is also typically not associated with cardiogenic shock; instead, patients commonly present with hypotension as the heart fails to circulate blood effectively. Therefore, the presence of a lower heart rate aligns with the characteristic manifestations of cardiogenic shock.

SAMPLE

9. Which team member can determine a patient's level of consciousness?

A. Any team member

B. Team leader only

C. Junior team members

D. Nurses only

The team leader plays a crucial role in assessing a patient's level of consciousness, as this responsibility typically falls on individuals with the highest level of training and experience in the group. The team leader is often responsible for coordinating care and making critical decisions based on a comprehensive assessment of the patient, which includes evaluating their responsiveness. While it is true that other team members, such as nurses or paramedics, can assist in gathering relevant information about the patient's status, it is the team leader who synthesizes this information to make judgments about the patient's level of consciousness, formulating a cohesive treatment plan. The team leader's expertise in conducting thorough assessments aligns with their role in leading the team and ensuring optimal care for the patient. Other team members may possess skills that allow them to contribute to this assessment, but the specific determination of the level of consciousness is primarily the responsibility of the team leader, emphasizing their leadership and clinical decision-making role in managing trauma cases.

10. Which of the following is NOT part of the ITLS Primary Survey items?

A. Scene Size-up

B. Initial Assessment

C. Patient transport plan

D. Rapid Trauma Survey or Focused Exam

The primary survey in the ITLS framework is focused on quickly assessing and addressing life-threatening conditions in trauma patients. It includes critical steps designed to ensure the safety of responders, assess the patient's responsiveness, airway, breathing, circulation, and conduct a rapid trauma survey or focused exam. The scene size-up is essential as it ensures that the environment is safe for both the responder and the patient, allowing for a systematic approach to patient care. The initial assessment involves a thorough evaluation of the patient's consciousness and vital physiological parameters, as well as identifying any immediate life threats. The rapid trauma survey or focused exam is conducted to detect other injuries that may not be apparent, ensuring comprehensive management of the patient's condition. In this context, the patient transport plan is not part of the primary survey items. While considerations for transport are critical in trauma management, they occur after the primary survey has been completed. The primary survey's main goal is to stabilize the patient's immediate needs before planning transport, making the transport plan unrelated to the rapid assessment and intervention that defines the primary survey steps.

SAMPLE

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://intltraumalifesupport.examzify.com

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

SAMPLE