NEW MEXICO SCOPE OF PRACTICE EMT PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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.

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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!

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Questions

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1. Which statement is true about Level 2 trauma centers' 24/7 availability?

A. 24/7 trauma is available

B. Clinical hours only

C. 24/7 trauma is not available

D. Emergency surgery not available

2. Ipratropium contraindications include allergy to which substances?

A. Soy, peanuts, and atropine

B. Gluten and dairy

C. Penicillin

D. Shellfish

3. Which committee establishes standards, develops curricula, grants approval for EMS education programs, and identifies the requirements for EMS instructors?

A. STEMI Program

B. Santa Fe Control

C. JOE Committee

D. NMEMSTARS

4. What is the recommended adult CPR compression-to-ventilation ratio when there is a single rescuer?

A. 15 compressions to 2 breaths.

B. 30 compressions to 2 breaths.

C. 30 compressions to 4 breaths.

D. 40 compressions to 2 breaths.

5. Which pair of stroke scales are used in NM's scope of practice?

A. Cincinnati

B. NIHSS

C. Cincinnati and Los Angeles

D. Los Angeles

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6. Which of the following is a contraindication to nitroglycerin due to potential dangerous interaction with erectile dysfunction medications?

A. Use of erectile dysfunction medications within the last 24-48 hours

B. Severe hypotension (SBP < 100)

C. Extreme bradycardia (HR < 50)

D. Tachycardia in the absence of heart failure (HR > 120)

7. Which statement accurately describes Level 2 trauma centers?

A. 24/7 trauma available

B. Clinical hours only

C. 24/7 trauma not available

D. Emergency surgery not available

8. Oxygen is typically indicated in EMS for which conditions?

A. Hypoxia, respiratory distress, shock, or suspected hypoxemia

B. Hypertension

C. Dehydration

D. Chest pain only

9. When documenting EMS care, which item is essential to include in the PCR?

A. Documentation of findings, interventions, times, and rationale for transport

B. The color of the patient's clothing

C. The weather conditions at scene

D. The patient's favorite food

10. EMT-B personnel may administer epinephrine using which devices?

A. Pre-filled device only

B. 0.3 mL dose-limiting syringe only

C. Either a pre-filled device or a 0.3 mL dose-limiting syringe

D. Neither device is permitted

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Answers

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

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Explanations

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1. Which statement is true about Level 2 trauma centers' 24/7 availability?

A. 24/7 trauma is available

B. Clinical hours only

C. 24/7 trauma is not available

D. Emergency surgery not available

The key idea is that Level 2 centers do not guarantee a continuously staffed trauma team around the clock. They are capable of providing advanced trauma care, but after-hours coverage often relies on on-call specialists or transfer arrangements rather than a guaranteed on-site trauma team at all times. That's why the statement about 24/7 trauma not being available is considered true in this context: there isn't an automatic guarantee of round-the-clock trauma activation at Level 2 centers. The other options imply constant 24/7 on-site availability or deny all emergency services, which isn't accurate for Level 2 centers. They can perform many emergency procedures and manage urgent cases, but 24/7 on-site availability is not presumed the same way as it is at Level 1 centers.

2. Ipratropium contraindications include allergy to which substances?

A. Soy, peanuts, and atropine

B. Gluten and dairy

C. Penicillin

D. Shellfish

Ip ratropium is an inhaled anticholinergic bronchodilator that blocks muscarinic receptors in the airway to reduce bronchospasm. Because it acts on atropine-like pathways, there can be cross-sensitivity with atropine and related compounds. If someone has a known allergy to atropine or to ipratropium itself, this medication should be avoided due to the risk of an allergic reaction or excessive anticholinergic effects. Some formulations of ipratropium inhalers or their excipients may contain soy or peanut derivatives (such as lecithin or oil). For patients with severe soy or peanut allergies, exposure to these excipients could trigger an allergic reaction, so these allergies are considered contraindications in those contexts. That's why the combination of allergies to soy, peanuts, and atropine is cited as a contraindication for ipratropium. Gluten, dairy, penicillin, and shellfish allergies do not have a direct contraindicated link to ipratropium in standard practice.

3. Which committee establishes standards, develops curricula, grants approval for EMS education programs, and identifies the requirements for EMS instructors?

A. STEMI Program

B. Santa Fe Control

C. JOE Committee

D. NMEMSTARS

Focus on who is responsible for EMS education governance. The JOE Committee is the body that sets EMS education standards, develops curricula, approves EMS education programs, and defines the requirements for EMS instructors. This group ensures that training aligns with state regulations and quality expectations, and it establishes the qualifications instructors must meet. The other options don't cover education oversight: the STEMI Program deals with a specific clinical protocol; Santa Fe Control refers to medical control authority for clinical decisions; NMEMSTARS is a data and information system. So the JOE Committee is the best answer because it specifically handles education standards, curricula, program approval, and instructor requirements.

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4. What is the recommended adult CPR compression-to-ventilation ratio when there is a single rescuer?

A. 15 compressions to 2 breaths.

B. 30 compressions to 2 breaths.

C. 30 compressions to 4 breaths.

D. 40 compressions to 2 breaths.

In adult CPR for a single rescuer, the goal is to maintain blood flow while providing ventilation. The standard cycle is 30 chest compressions followed by 2 rescue breaths. This ratio delivers enough circulatory support to keep perfusion going, while still giving breaths to oxygenate the blood without interrupting compressions for too long. The brief, effective breaths after 30 compressions minimize the time without chest compressions, helping maintain cerebral and coronary perfusion. Keep the pace around 100–120 compressions per minute and resume compressions immediately after the two breaths, ensuring full chest recoil between compressions.

5. Which pair of stroke scales are used in NM's scope of practice?

A. Cincinnati

B. NIHSS

C. Cincinnati and Los Angeles

D. Los Angeles

In NM's emergency medical practice, identifying a potential stroke in the field relies on quick, simple prehospital scales rather than the full hospital assessment. The pair used here is the Cincinnati Prehospital Stroke Scale and the Los Angeles Prehospital Stroke Scale. The Cincinnati scale checks three rapid signs—facial droop, arm drift, and speech abnormalities—and any abnormal finding flags possible stroke, prompting expedited transport to a stroke-appropriate facility. The Los Angeles scale builds on that approach with additional field-friendly criteria (such as age, time since onset, and a combination of objective neurological signs) to refine the likelihood of stroke during EMS evaluation. The NIHSS, by contrast, is a comprehensive in-hospital tool for measuring stroke severity and is not typically used in NM's prehospital scope.

6. Which of the following is a contraindication to nitroglycerin due to potential dangerous interaction with erectile dysfunction medications?

A. Use of erectile dysfunction medications within the last 24-48 hours

B. Severe hypotension (SBP < 100)

C. Extreme bradycardia (HR < 50)

D. Tachycardia in the absence of heart failure (HR > 120)

The key concept is the dangerous interaction between nitroglycerin and erectile dysfunction medications. Nitrates raise nitric oxide levels and increase cGMP, leading to vasodilation and lower blood pressure. Erectile dysfunction drugs (PDE5 inhibitors) also enhance the same cGMP pathway by inhibiting its breakdown. When both are present, the combined effect can cause a rapid and significant drop in blood pressure, risking fainting, shock, or myocardial ischemia. Because PDE5 inhibitors remain active in the body for about 24 to 48 hours (depending on the specific drug), using nitroglycerin within that window is a true contraindication. While severe hypotension is itself a reason not to give nitroglycerin, and extreme bradycardia or tachycardia without heart failure can complicate management, the special concern in this question is the interaction with erectile dysfunction medications. That interaction is what makes recent or current ED med use the correct contraindication.

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7. Which statement accurately describes Level 2 trauma centers?

A. 24/7 trauma available

B. Clinical hours only

C. 24/7 trauma not available

D. Emergency surgery not available

Level 2 trauma centers provide continuous, 24/7 trauma care with a trauma team available at all times to begin definitive treatment for injured patients. They can perform emergent surgical interventions and rapid stabilization, and they have 24/7 access to essential services like imaging and labs, though some subspecialists may be called in as needed rather than occupying in-house all hours. Therefore, the statement that 24/7 trauma care is not available does not describe Level 2 centers.

8. Oxygen is typically indicated in EMS for which conditions?

A. Hypoxia, respiratory distress, shock, or suspected hypoxemia

B. Hypertension

C. Dehydration

D. Chest pain only

Oxygen is given in EMS when the patient is not getting enough oxygen to the tissues. This includes situations where oxygenation is directly impaired or where delivery to the tissues may be compromised. The best indicator here is hypoxia or suspected hypoxemia, as well as signs of respiratory distress or shock, which can all lead to inadequate oxygen delivery even before a definitive diagnosis is known. Hypertension and dehydration aren't, by themselves, indications for supplemental oxygen because they don't directly reflect a failure to oxygenate the blood. Chest pain alone isn't an automatic trigger for oxygen unless the patient is showing signs of hypoxemia or respiratory distress. In practice, you'd give oxygen when there are clear signs of poor oxygenation or when a patient is at risk of hypoxemia due to their current condition.

9. When documenting EMS care, which item is essential to include in the PCR?

A. Documentation of findings, interventions, times, and rationale for transport

B. The color of the patient's clothing

C. The weather conditions at scene

D. The patient's favorite food

Accurate, complete documentation of the EMS encounter is essential because the prehospital care report serves as the legal medical record and ensures continuity of care. The most important elements to include are findings, interventions, times, and the rationale for transport. Recording findings provides a clear picture of the patient's condition; documenting interventions shows what actions were taken and what medications or procedures were performed; noting times creates a reliable timeline for handoffs and ongoing care; and the rationale for transport explains why hospital care was chosen. Details such as the color of clothing, weather conditions at the scene, or the patient's favorite food do not affect medical decision-making and do not belong in the PCR.

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10. EMT-B personnel may administer epinephrine using which devices?

A. Pre-filled device only

B. 0.3 mL dose-limiting syringe only

C. Either a pre-filled device or a 0.3 mL dose-limiting syringe

D. Neither device is permitted

Epinephrine delivery in EMT-B practice can be done with two safe, effective tools: a ready-to-use pre-filled auto-injector and a syringe that is limited to a 0.3 mL dose. The auto-injector provides a quick, simple administration with a fixed dose, which is especially helpful in a high-stress allergic reaction. The 0.3 mL dose-limiting syringe offers precise control over the amount given when a manual syringe is appropriate or when an auto-injector isn't available. Both methods are accepted under typical EMT-B protocols, so either device may be used. The idea is to have a reliable means to deliver the life-saving drug promptly and safely, not to be restricted to one delivery method.

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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://nmscopeofpracticeemt.examzify.com

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

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