NEW YORK STATE BASIC EMERGENCY MEDICAL TECHNICIAN (EMT-B) PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://newyorkstate-emtb.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 correct ratio of compressions to ventilations for one-rescuer CPR on an adult without an advanced airway?

A. 15 compressions to 2 ventilations

B. 30 compressions to 2 ventilations

C. 30 compressions to 1 ventilation

D. 20 compressions to 2 ventilations

2. What is a characteristic of arterial bleeding?

A. Flows continuously from the wound

B. Flows from the wound in distinct spurts

C. Is dark and viscous in appearance

D. Is easily controlled with direct pressure

3. What is the primary difference between angina and a heart attack?

A. Angina is a result of sudden artery blockage

B. Heart attack is caused by spastic constriction of arteries

C. Angina involves spastic constriction of the arteries

D. Heart attack results from a gradual narrowing of arteries

4. What is your first action when responding to a call for a possible suicide involving a locked basement?

A. Enter the basement immediately

B. Request police assistance before entering

C. Try to speak with the patient through the door

D. Call for backup EMS support

5. In patients with COPD, respiration is controlled by what factor?

A. High oxygen levels

B. Carbon dioxide levels

C. Low oxygen levels

D. Blood pressure

SAMPLE

6. What prevents foreign matter from entering the trachea?

A. Palate

B. Epiglottis

C. Pharynx

D. Larynx

7. How can bleeding from a vein be characterized?

A. Bright red and spurting

B. Dark red, flowing steadily

C. Pale yellow and oozing

D. Dark brown and clotted

8. If an adult suffers partial thickness burns over the chest, abdomen, back, buttocks, and right arm, what percentage of body surface has been burned according to the rule of 9's?

A. 36%

B. 45%

C. 54%

D. 27%

9. Which indicator is the BEST for assessing the quality of ventilations?

A. Chest expansion

B. Pupil size

C. Blood pressure

D. Skin color

10. When should a victim of a diving accident be removed from the water?

A. As soon as they show signs of distress

B. Only after proper immobilization

C. Immediately if they are unconscious

D. After they have been stabilized on the shore

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What is the correct ratio of compressions to ventilations for one-rescuer CPR on an adult without an advanced airway?

A. 15 compressions to 2 ventilations

B. 30 compressions to 2 ventilations

C. 30 compressions to 1 ventilation

D. 20 compressions to 2 ventilations

The correct ratio of compressions to ventilations for one-rescuer CPR on an adult without an advanced airway is 30 compressions to 2 ventilations. This ratio is based on the current guidelines from organizations such as the American Heart Association, which recommend performing chest compressions at a rate of 100 to 120 compressions per minute, followed by delivering two breaths to provide adequate ventilation. This ratio is designed to ensure that blood flow is maintained effectively while allowing for the necessary airflow to help oxygenate the patient. The focus on a 30:2 ratio is particularly important because it allows the rescuer to maximize the number of compressions provided, which is crucial for maintaining circulation during cardiac arrest. In contrast, other ratios do not align with these guidelines. The 15:2 ratio would result in fewer compressions being performed, which could be ineffective in maintaining blood circulation. A 30:1 ratio does not provide sufficient ventilation opportunities, while a 20:2 ratio does not follow the recommended practice that emphasizes delivering more compressions per minute. Thus, the 30:2 ratio is established as the most effective method for one-rescuer CPR in adults without an advanced airway.

2. What is a characteristic of arterial bleeding?

A. Flows continuously from the wound

B. Flows from the wound in distinct spurts

C. Is dark and viscous in appearance

D. Is easily controlled with direct pressure

Arterial bleeding is characterized by blood that flows from the wound in distinct spurts. This pulsating flow corresponds with the heartbeat, as arteries carry oxygen-rich blood away from the heart under high pressure. The rhythmic spurting is a crucial indicator, as it usually suggests that an artery has been severed or seriously damaged. Recognizing this pattern is critical for EMTs and first responders, as it typically indicates a more severe type of bleeding that can lead to rapid blood loss and necessitates immediate medical intervention. In contrast, continuous bleeding is more characteristic of venous bleeding, which lacks the pulsatile nature seen in arterial injuries. The color and viscosity of arterial blood are also different, with arterial blood being bright red and less viscous than that from veins. Therefore, understanding these characteristics is essential for proper assessment and management of bleeding in emergency scenarios.

SAMPLE

3. What is the primary difference between angina and a heart attack?

A. Angina is a result of sudden artery blockage

B. Heart attack is caused by spastic constriction of arteries

C. Angina involves spastic constriction of the arteries

D. Heart attack results from a gradual narrowing of arteries

The primary difference between angina and a heart attack revolves around the nature of the blood flow obstruction to the heart muscle. Angina is characterized by chest pain or discomfort that occurs when the heart muscle does not receive enough oxygen-rich blood, often due to spastic constriction or transient narrowing of the coronary arteries. This can be triggered by physical exertion or stress but typically resolves with rest or medication. In contrast, a heart attack occurs when there is a complete blockage of a coronary artery, often due to plaque rupture and the formation of a blood clot. This blockage prevents blood flow to a part of the heart muscle, leading to tissue damage if not quickly treated. Understanding this distinction is crucial as it underscores different underlying mechanisms and treatment approaches for each condition. Thus, angina involves spastic constriction of the arteries, making it the correct choice in distinguishing it from a heart attack.

4. What is your first action when responding to a call for a possible suicide involving a locked basement?

A. Enter the basement immediately

B. Request police assistance before entering

C. Try to speak with the patient through the door

D. Call for backup EMS support

When responding to a call for a possible suicide, the safety of both the patient and the emergency responder is paramount. Requesting police assistance before entering is the appropriate first action in this situation for several reasons. Firstly, the situation could be unsafe for the EMT. Locked areas may indicate that the individual is in a distressing state that could lead to further self-harm or harm to others. Police can help ensure that the scene is secure and that any potential threats are neutralized. Secondly, police are trained to deal with crisis situations, including those involving potential suicide. They can assess the situation and determine if it is safe for medical personnel to proceed. Thirdly, approaching the individual without a plan or backup can escalate the situation, leading to further risk for everyone involved. By requesting assistance, the EMT is prioritizing both their own safety and the well-being of the patient. In this scenario, other options like entering the basement immediately or trying to speak through the door may lead to increased risk and worsen the situation, while calling for backup EMS support may not sufficiently address the potential dangers present. Thus, engaging law enforcement first is the most prudent and safest course of action.

SAMPLE

5. In patients with COPD, respiration is controlled by what factor?

A. High oxygen levels

B. Carbon dioxide levels

C. Low oxygen levels

D. Blood pressure

In patients with Chronic Obstructive Pulmonary Disease (COPD), respiration is primarily driven by low oxygen levels, a process known as hypoxic drive. In healthy individuals, the main stimulus for breathing is the level of carbon dioxide in the blood. However, many patients with COPD have adapted to high carbon dioxide levels over time due to their deteriorating lung function. This adaptation alters their respiratory drive, causing it to rely more on oxygen levels rather than carbon dioxide levels. When the oxygen levels drop sufficiently in these patients, it triggers the urge to breathe. Therefore, in the context of managing COPD, it is critical to monitor and maintain appropriate oxygen levels because excessive oxygen administration can suppress the patient's respiratory drive, leading to respiratory failure. This reflects the importance of understanding how the body adapts to chronic respiratory issues and how treatment approaches must be carefully tailored to keep the balance in such patients.

6. What prevents foreign matter from entering the trachea?

A. Palate

B. Epiglottis

C. Pharynx

D. Larynx

The epiglottis plays a crucial role in preventing foreign matter from entering the trachea during the process of swallowing. It is a flap of cartilage located at the base of the tongue that acts as a gatekeeper for the airway. When a person swallows, the epiglottis folds down to cover the trachea, directing food and liquids into the esophagus. This protective mechanism ensures that substances meant for the digestive system do not accidentally enter the respiratory tract, which could lead to choking or aspiration. The other structures mentioned do not have this specific function. The palate, for instance, primarily separates the oral cavity from the nasal cavity and does not prevent foreign matter from entering the airway. The pharynx serves as a passageway for both food and air but does not actively block foreign substances. Similarly, while the larynx is involved in sound production and also plays a role in protecting the airway by initiating a cough reflex when irritants are detected, it does not provide the direct barrier that the epiglottis does during swallowing. Therefore, the epiglottis is essential for safeguarding the trachea from unwanted material entering during the act of eating or drinking.

SAMPLE

7. How can bleeding from a vein be characterized?

A. Bright red and spurting

B. Dark red, flowing steadily

C. Pale yellow and oozing

D. Dark brown and clotted

Bleeding from a vein is characterized by dark red, flowing steadily. This is because venous blood, which returns to the heart, is deoxygenated and typically has a darker color compared to arterial blood. When a vein is damaged, the blood exits the body in a steady flow rather than in spurts, which is typical of arterial bleeding. The steady flow occurs due to the lower pressure in the venous system compared to the arterial system. When considering the other descriptors, bright red and spurting is indicative of arterial bleeding, which is under higher pressure and oxygen-rich. Pale yellow and oozing does not represent the characteristics of any significant bleeding and is more associated with minor fluid loss. Dark brown and clotted would suggest old blood or a different pathological state, which is not typical of active venous bleeding in an acute setting. Understanding these characteristics is crucial for EMTs in assessing a patient's condition and determining the appropriate course of treatment.

8. If an adult suffers partial thickness burns over the chest, abdomen, back, buttocks, and right arm, what percentage of body surface has been burned according to the rule of 9's?

A. 36%

B. 45%

C. 54%

D. 27%

To determine the total percentage of body surface burned using the Rule of Nines for adults, each major area of the body is assigned a specific percentage. According to the Rule of Nines: - The head and neck account for 9%. - Each arm represents 9%. - Each leg represents 18%. - The anterior trunk (chest and abdomen) accounts for 18%. - The posterior trunk (back and buttocks) also accounts for 18%. In this scenario, the burns are located on the chest, abdomen, back, buttocks, and right arm. Breaking it down: - The anterior trunk (chest and abdomen combined) is 18%. - The posterior trunk (back and buttocks combined) is also 18%. - The right arm accounts for 9%. Adding these together: 18% (anterior trunk) + 18% (posterior trunk) + 9% (right arm) = 45%. Thus, the total body surface area burned is properly calculated as 45%, making it the correct answer. This method of assessment is crucial for determining the severity of burns and guiding treatment decisions effectively.

SAMPLE

9. Which indicator is the BEST for assessing the quality of ventilations?

A. Chest expansion

B. Pupil size

C. Blood pressure

D. Skin color

Chest expansion is the best indicator for assessing the quality of ventilations because it directly reflects the effectiveness of air movement into the lungs. When ventilations are adequate, you would observe symmetrical and full expansion of the chest wall with each breath. This physical movement indicates that air is entering the lungs properly, allowing for effective gas exchange. Other indicators, such as pupil size, blood pressure, and skin color, do provide valuable information about a patient's overall condition and oxygenation status but do not specifically assess the mechanical aspect of ventilation. Pupil size can change due to various factors, including neurological responses or drug effects, while blood pressure reflects cardiovascular status. Skin color can indicate oxygenation levels, but it is not a direct assessment of how well the ventilation process is occurring. Therefore, focusing on chest expansion provides the most relevant and direct information regarding the quality of ventilations during airway management.

10. When should a victim of a diving accident be removed from the water?

A. As soon as they show signs of distress

B. Only after proper immobilization

C. Immediately if they are unconscious

D. After they have been stabilized on the shore

In the context of a diving accident, the most critical factor is the potential for spinal injury due to the mechanism of the accident, particularly if the victim struck their head during the dive. Removing the victim from the water must be done cautiously to avoid exacerbating any possible injuries. Proper immobilization is essential because it helps to protect the spine from additional movement that could lead to further damage. Before attempting to remove a victim from the water, it is important to ensure that their head and neck are stabilized. This may involve using various immobilization techniques, including spinal boards and manual stabilization by rescuers. This is done to minimize movement along the spine, which is crucial as not all injuries are immediately apparent, and without proper care, further injury can result. While showing signs of distress or being unconscious could indicate urgency, it does not negate the necessity for immobilization. Likewise, waiting until the victim is stabilized on the shore before extraction may not address the immediate risks present in the water. Thus, ensuring proper immobilization before removal is essential for the safety and care of the victim.

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://newyorkstate-emtb.examzify.com

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

SAMPLE