SNHD ADVANCED EMT (AEMT) PROTOCOLS PRACTICE TEST (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. In the context of pregnancy, how is hypertension defined?

A. Systolic >160 or diastolic >110

B. Systolic >140 or diastolic >90

C. Systolic >130 or diastolic >85

D. Systolic >120 or diastolic >80

2. What is the appropriate dose of D10 for adults?

A. 15 gm IV

B. 25 gm IV

C. 50 gm IV

D. 100 gm IV

3. How frequently can Nitroglycerin be administered to a patient experiencing chest pain?

A. Every 10 minutes

B. Every 5 minutes

C. Every 15 minutes

D. Only once

4. When should an AEMT consider placing a patient on a continuous Positive Airway Pressure (CPAP) device?

A. For patients in acute respiratory distress with conditions like CHF or COPD

B. For patients experiencing chest pain

C. For patients with seizure activity

D. For patients with hypoglycemia

5. How much normal saline should a patient complaining of abdominal pain and showing signs of hypovolemia receive?

A. 250 mL bolus, repeated up to 1000 mL

B. 500 mL bolus, repeated up to 2000 mL

C. 750 mL bolus, repeated up to 3000 mL

D. 1000 mL bolus, repeated up to 4000 mL

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6. Which type of drug is commonly used to treat overdoses?

A. Narcan

B. Glucagon

C. Glucose

D. Solu-Cortef

7. What is an important consideration when providing supplemental oxygen to patients with chronic respiratory conditions?

A. It can create dependency

B. It should be avoided

C. It must be provided constantly

D. Monitoring oxygen saturation is essential

8. Which medication is specifically used by AEMTs to treat asthma attacks?

A. Albuterol

B. Aspirin

C. Nitroglycerin

D. Atropine

9. Which of the following patients do not need spinal immobilization?

A. Penetrating trauma to the abdomen

B. Penetrating trauma to the head with spinal injury evidence

C. Penetrating trauma to the head and/or neck with no evidence of spinal injury

D. Patients with a history of back surgery

10. What is the oral glucose dosage for adults?

A. 15 gm

B. 25 gm

C. 35 gm

D. 50 gm

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Answers

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

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Explanations

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1. In the context of pregnancy, how is hypertension defined?

A. Systolic >160 or diastolic >110

B. Systolic >140 or diastolic >90

C. Systolic >130 or diastolic >85

D. Systolic >120 or diastolic >80

Hypertension during pregnancy is defined using specific thresholds to determine when a patient's blood pressure is concerning enough to warrant further investigation or intervention. The correct definition for hypertension in this context is a systolic blood pressure greater than 140 mmHg or a diastolic blood pressure greater than 90 mmHg. This classification aligns with guidelines used in obstetric care, recognizing that elevated blood pressure in these ranges can pose health risks to both the mother and the developing fetus. Understanding this definition is crucial for early detection and management of conditions such as gestational hypertension and preeclampsia, which can have significant implications for maternal and fetal health. The other options represent definitions used for general hypertension in a non-pregnant population and may not account for the specific physiological changes that occur during pregnancy.

2. What is the appropriate dose of D10 for adults?

A. 15 gm IV

B. 25 gm IV

C. 50 gm IV

D. 100 gm IV

The appropriate dose of D10 (10% dextrose) for adults is generally recognized as 25 grams administered intravenously. This dose is commonly used in clinical settings to manage hypoglycemia when a rapid increase in blood sugar levels is needed. Administering this amount of dextrose helps to quickly restore adequate glucose levels in patients who may be experiencing altered mental status or symptoms related to hypoglycemic episodes. The 25-gram dose is effective in providing the necessary glucose without overwhelming the patient's system, keeping in mind that a higher concentration or dose might lead to potential complications, such as fluid overload or hyperglycemia. Using 25 grams strikes a balance between efficacy and safety for adult patients who require immediate treatment for low blood sugar.

3. How frequently can Nitroglycerin be administered to a patient experiencing chest pain?

A. Every 10 minutes

B. Every 5 minutes

C. Every 15 minutes

D. Only once

Nitroglycerin can be administered every 5 minutes to a patient experiencing chest pain, particularly in cases of suspected angina or acute coronary syndrome. This frequency allows for timely relief of chest pain since nitroglycerin acts as a vasodilator, increasing blood flow to the heart muscles and relieving ischemic pain. The quick re-administration ensures that if the patient's symptoms persist after the initial dose, additional doses can be given to enhance therapeutic effect while closely monitoring the patient's condition for any adverse reactions. This protocol maximizes the potential benefits of nitroglycerin while allowing for the observation of any changes in the patient's symptoms or vital signs that would require further evaluation or treatment. It's essential to educate patients about the importance of seeking medical attention if chest pain does not resolve after three doses within a 15-minute period, as this may indicate a more serious underlying issue, such as a myocardial infarction.

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4. When should an AEMT consider placing a patient on a continuous Positive Airway Pressure (CPAP) device?

A. For patients in acute respiratory distress with conditions like CHF or COPD

B. For patients experiencing chest pain

C. For patients with seizure activity

D. For patients with hypoglycemia

An AEMT should consider placing a patient on a continuous Positive Airway Pressure (CPAP) device primarily for patients in acute respiratory distress, particularly those with conditions such as congestive heart failure (CHF) or chronic obstructive pulmonary disease (COPD). CPAP is a non-invasive ventilation strategy that helps keep the airways open, reduces the work of breathing, and improves oxygenation. In cases of CHF, fluid accumulation in the lungs can lead to pulmonary edema and significant respiratory distress. CPAP helps by improving functional residual capacity and enabling better gas exchange. For COPD patients, airway obstruction exacerbates the struggle to breathe, and CPAP can provide the necessary support to maintain adequate airflow. While other conditions such as chest pain, seizure activity, or hypoglycemia may require immediate medical attention, they do not typically warrant the use of CPAP. Chest pain may indicate a cardiac issue requiring different interventions, seizure activity needs stabilization and possible airway protection, and hypoglycemia requires glucose administration rather than respiratory support. Thus, the application of CPAP is specifically appropriate in the context of acute respiratory distress related to CHF and COPD.

5. How much normal saline should a patient complaining of abdominal pain and showing signs of hypovolemia receive?

A. 250 mL bolus, repeated up to 1000 mL

B. 500 mL bolus, repeated up to 2000 mL

C. 750 mL bolus, repeated up to 3000 mL

D. 1000 mL bolus, repeated up to 4000 mL

In the context of treating a patient presenting with abdominal pain and signs of hypovolemia, administering 500 mL boluses of normal saline, with the option to repeat up to a total of 2000 mL, is appropriate for several reasons. Hypovolemia can result from various causes, including fluid loss from gastrointestinal issues, bleeding, or other medical conditions, making it critical to restore circulatory volume effectively and safely. The choice of a 500 mL bolus is a balanced approach that allows for rapid fluid resuscitation without overwhelming the patient's cardiovascular system. This volume facilitates close monitoring for potential responses or complications, such as fluid overload or changes in vital signs, particularly in patients who may be sensitive to larger volumes. Moreover, the ability to repeat up to a total of 2000 mL provides flexibility, allowing the healthcare provider to tailor the resuscitation to the patient's ongoing response, ensuring that fluid administration is guided by clinical assessment. This method promotes a cautious yet effective strategy in managing hypovolemia while keeping an eye on the patient's comfort and physiological stability. Other volumetric options presented may be excessive or too aggressive, which can pose risks and would necessitate careful monitoring beyond standard protocols, particularly in the

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6. Which type of drug is commonly used to treat overdoses?

A. Narcan

B. Glucagon

C. Glucose

D. Solu-Cortef

Narcan, also known as naloxone, is the correct choice for treating overdoses, particularly those involving opioids such as heroin, morphine, or prescription pain medications. Naloxone works as an opioid antagonist, meaning it can bind to opioid receptors in the brain and displace the opioid that is causing respiratory depression or sedation, effectively reversing the effects of the overdose. The rapid onset of action and the ability to restore normal breathing make Narcan a critical medication in emergency situations. In contrast, glucagon is primarily used for managing hypoglycemia in diabetic patients, glucose is a quick source of sugar for treating low blood sugar, and Solu-Cortef (hydrocortisone) is a corticosteroid used for its anti-inflammatory properties or to treat adrenal insufficiency. None of these alternatives are effective in reversing the effects of opioid overdoses, which is why Narcan is specifically sought out for such emergencies.

7. What is an important consideration when providing supplemental oxygen to patients with chronic respiratory conditions?

A. It can create dependency

B. It should be avoided

C. It must be provided constantly

D. Monitoring oxygen saturation is essential

When providing supplemental oxygen to patients with chronic respiratory conditions, monitoring oxygen saturation is essential because these patients often have a complex interplay of oxygenation needs and respiratory drive. Many individuals with chronic respiratory issues, such as COPD, may have adapted to lower levels of oxygen and rely on hypoxic drive to stimulate their breathing. By closely monitoring oxygen saturation, healthcare providers can ensure that they are delivering adequate oxygen without crossing thresholds that may suppress the patient's respiratory drive. This careful balance helps to prevent complications such as respiratory acidosis or hypoventilation, which can occur if oxygen levels are too high. In essence, monitoring allows for personalized management of oxygen therapy, tailored to each patient's unique needs, thereby reducing the risk of potential adverse effects associated with oxygen therapy in chronic respiratory patients.

8. Which medication is specifically used by AEMTs to treat asthma attacks?

A. Albuterol

B. Aspirin

C. Nitroglycerin

D. Atropine

Albuterol is specifically used by AEMTs to treat asthma attacks due to its classification as a short-acting beta-2 adrenergic agonist. This medication functions by relaxing the muscles in the airways, leading to bronchial dilation and improved airflow, which is critical during an asthma attack where airway constriction is prominent. Albuterol acts quickly, typically within minutes, providing rapid relief from acute symptoms such as wheezing, shortness of breath, and chest tightness associated with asthma. The other medications listed do not serve this purpose. Aspirin is primarily used to reduce pain and inflammation, and to inhibit platelet aggregation in certain cardiac events, but it does not address the bronchodilation needed in asthma. Nitroglycerin is a vasodilator used for chest pain or heart-related issues, and it also does not relieve asthma symptoms. Atropine, while it can be used in some respiratory conditions, primarily serves to increase heart rate and does not act specifically to alleviate bronchospasm like albuterol does. Thus, albuterol is the appropriate choice for treating asthma attacks among the options provided.

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9. Which of the following patients do not need spinal immobilization?

A. Penetrating trauma to the abdomen

B. Penetrating trauma to the head with spinal injury evidence

C. Penetrating trauma to the head and/or neck with no evidence of spinal injury

D. Patients with a history of back surgery

Patients who have penetrating trauma to the head and/or neck with no evidence of spinal injury typically do not require spinal immobilization. The rationale behind this is based on the assessment of the mechanisms of injury and the presence of specific clinical indicators that suggest spinal compromise. In cases where there is no evidence of injury to the spinal cord or vertebral structures, the risk of further injury due to movement is minimized, meaning spinal immobilization may not be necessary. Therefore, focusing on patients who show no signs of neurological deficits or spinal injury allows emergency responders to prioritize care based on the most immediate threats to life rather than employing unnecessary precautions. Spinal immobilization is particularly important in cases where trauma has occurred with clear signs of spinal injury or potential injury, such as penetrating trauma to the abdomen, head, and neck with evidence indicative of spinal involvement. In contrast, patients with a history of back surgery still may need individual assessment to determine their stability. However, if a patient has sustained penetrating trauma to the head and/or neck without any indicators of spinal injury, spinal immobilization can be deemed unnecessary.

10. What is the oral glucose dosage for adults?

A. 15 gm

B. 25 gm

C. 35 gm

D. 50 gm

Treat hypoglycemia in an awake patient by giving fast-acting carbohydrate to raise the blood sugar quickly. The standard adult dose in many SNHD AEMT guidelines is 25 grams of oral glucose. This amount provides enough glucose to raise circulating levels promptly while staying within safe, practical limits for self-administration or caregiver assistance. Do not give if the patient cannot swallow or has an altered level of consciousness; in those cases, use alternative routes such as IV dextrose or glucagon per protocol. After administration, recheck the blood glucose in about 15 minutes and repeat the dose if the value remains low and the patient can safely swallow. Oral glucose comes as gel, paste, or tablets, and should be given with the patient's safety and airway in mind.

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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:

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

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