STANDARD FIRST AID, CPR, AND AED PRE-TEST 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 of the following is a sign or symptom of a possible head or brain injury?

A. Nausea, vomiting, severe or persistent headache; problems with vision or speech

B. Shortness of breath and chest pain

C. Abdominal pain with vomiting

D. Rash on the skin

2. If you suspect a spinal injury in an injured person, what is the recommended action?

A. Keep the person still and stabilize the head and neck.

B. Place the person in the recovery position.

C. Move the person to a chair.

D. Check for a pulse.

3. What is implied consent in first aid?

A. If the patient is unconscious or unable to respond, you may provide necessary aid under implied consent; obtain explicit consent if the person regains capacity.

B. Consent is always required before any first aid, even if the person cannot respond.

C. You should never begin first aid without written permission.

D. Implied consent means you must contact a lawyer before assisting.

4. Which statement accurately describes immobilizing a suspected fracture?

A. Move the limb to test stability.

B. Carry the patient before immobilizing.

C. Apply a splint to immobilize the limb, secure with bandages, and keep the patient as still as possible.

D. Break the suspected fracture to relieve pain.

5. What should you document after providing first aid?

A. Time of incident, patient demographics, observed symptoms, treatments given, and witnesses; hand over to responders.

B. Only the weather at the scene.

C. Only the patient's name.

D. No documentation required.

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6. In rescue breathing, how can you verify air is entering the victim's lungs?

A. Watch the chest rise and fall

B. Listen for the rushing sound of air filling the lungs

C. Blow hard to the point of resistance

D. Pinch the victim's nose and check for air bubbles

7. Which statement best describes universal precautions?

A. Always ignoring potential exposure

B. Only using gloves with known infections

C. Treat all blood and bodily fluids as potentially infected

D. Wash hands after patient contact

8. What is the recommended compression-to-breath ratio for a single rescuer performing CPR on an adult?

A. 15 compressions to 2 breaths

B. 30 compressions to 2 breaths

C. 30 compressions to 1 breath

D. 20 compressions to 2 breaths

9. Which action should be taken when a choking adult becomes unresponsive after abdominal thrusts?

A. Call EMS

B. Check airway

C. Perform abdominal thrusts

D. Start CPR

10. Which symptom may indicate an allergic reaction to a bee sting?

A. Dizziness without breathing problems

B. Chest pain only

C. Difficulty breathing

D. Itchy eyes only

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Answers

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

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Explanations

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1. Which of the following is a sign or symptom of a possible head or brain injury?

A. Nausea, vomiting, severe or persistent headache; problems with vision or speech

B. Shortness of breath and chest pain

C. Abdominal pain with vomiting

D. Rash on the skin

Understanding signs of head or brain injury focuses on symptoms that reflect changes in brain function after trauma. Nausea, vomiting, a severe or persistent headache, and new problems with vision or speech indicate the brain may be affected—these are neurologic signs that can accompany concussion or more serious intracranial injury. They show the brain isn't functioning normally after impact, which is why they're the best indicators of possible head injury. By contrast, shortness of breath and chest pain point to heart or lung issues, abdominal pain with vomiting suggests a gastrointestinal problem, and a rash is a skin finding. None of those are specific indicators of head or brain injury, which is why they're not the best match in this context. If head trauma occurs and these neurologic symptoms appear, it's important to seek medical evaluation promptly and monitor for any worsening signs such as confusion, weakness, seizures, or loss of consciousness.

2. If you suspect a spinal injury in an injured person, what is the recommended action?

A. Keep the person still and stabilize the head and neck.

B. Place the person in the recovery position.

C. Move the person to a chair.

D. Check for a pulse.

When there's a suspected spinal injury, the priority is to prevent any further movement of the spine because even small changes can worsen injury to the spinal cord. The best action is to keep the person still and immobilize the head and neck in a straight line with the body, so the spine stays aligned while you call for help and assess their condition. Turning them into a recovery position or moving them to a chair could twist the neck or spine and cause more damage. Checking for a pulse is part of the overall assessment, but it doesn't replace the need to maintain spinal alignment; you'd continue monitoring while keeping the spine stable and only move them if absolutely necessary for safety or unless you're trained to safely roll them as part of a spinal-immobilization technique.

3. What is implied consent in first aid?

A. If the patient is unconscious or unable to respond, you may provide necessary aid under implied consent; obtain explicit consent if the person regains capacity.

B. Consent is always required before any first aid, even if the person cannot respond.

C. You should never begin first aid without written permission.

D. Implied consent means you must contact a lawyer before assisting.

Implied consent in first aid means you may provide care when the person cannot give permission themselves, because in an emergency a reasonable person would want help. If someone is unconscious or unresponsive, you can take necessary, life-saving or life-sustaining actions within your trained scope. You continue until they regain capacity to decide for themselves or until a higher level of care arrives. Once they become capable, you should obtain explicit consent before continuing. If they regain and refuse care, you must respect their wishes. In emergencies involving minors or others who can't respond and no guardian is available, follow your local laws and training, but implied consent generally allows you to act to prevent harm.

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4. Which statement accurately describes immobilizing a suspected fracture?

A. Move the limb to test stability.

B. Carry the patient before immobilizing.

C. Apply a splint to immobilize the limb, secure with bandages, and keep the patient as still as possible.

D. Break the suspected fracture to relieve pain.

When a fracture is suspected, the priority is to prevent further injury by keeping the area from moving. The best approach is to apply a splint to immobilize the limb in the position found, secure it with bandages or cloth so it won't shift, and keep the person as still as possible while you arrange for transport. Immobilization reduces pain and protects surrounding tissues, nerves, and blood vessels from additional damage that movement could cause. If possible, pad under the splint and extend it beyond the joints above and below the fracture to provide stable support. After applying the splint, check distal circulation, sensation, and movement to ensure these remain intact, and monitor for any changes. Do not try to straighten a deformed limb or "break" the fracture to relieve pain.

5. What should you document after providing first aid?

A. Time of incident, patient demographics, observed symptoms, treatments given, and witnesses; hand over to responders.

B. Only the weather at the scene.

C. Only the patient's name.

D. No documentation required.

Documentation after giving first aid is about creating a clear record of what happened, what you did, and who was involved so that other responders can continue care smoothly and so the care you provided is traceable. The essential details to capture include the time of the incident, the patient's basic demographics, any observed symptoms or changes in condition, the treatments or actions you performed, and any witnesses who saw what happened. When you hand over to responders, include a concise summary of the situation and the care given so they know where things stand. This kind of record supports continuity of care, helps others understand the sequence of events, and provides documentation for accountability and follow-up. Details like the weather at the scene aren't relevant to the patient's ongoing care. Documenting only the patient's name leaves out critical information needed for safe and effective continuing care. And saying no documentation is required is unsafe because a proper record is a key part of responding to emergencies.

6. In rescue breathing, how can you verify air is entering the victim's lungs?

A. Watch the chest rise and fall

B. Listen for the rushing sound of air filling the lungs

C. Blow hard to the point of resistance

D. Pinch the victim's nose and check for air bubbles

During rescue breathing, you verify air entering the lungs by watching the chest as you deliver each breath. A visible rise in the chest shows that air is moving into the lungs and circulating. This direct sign is more reliable than sounds or other cues and confirms effective ventilation. Listening for a rushing sound isn't dependable because airflow can be quiet or muffled by the environment. Blowing hard to the point of resistance isn't advised because it can overinflate the lungs or push air into the stomach. Pinching the nose helps create a seal for mouth-to-mouth breaths, but you don't rely on air bubbles to tell you ventilation is occurring—the chest rise is the correct cue to look for. If you don't see rise, reposition the head, ensure a proper seal, check for an airway obstruction, and re-deliver the breath until you observe chest rise.

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7. Which statement best describes universal precautions?

A. Always ignoring potential exposure

B. Only using gloves with known infections

C. Treat all blood and bodily fluids as potentially infected

D. Wash hands after patient contact

Universal precautions are infection-control practices designed to protect you by assuming that any blood or bodily fluids could be infectious. The best statement reflects this approach: always treat all blood and bodily fluids as potentially infected, and use the appropriate protective measures (gloves and other PPE, eye/face protection when needed), along with proper hand hygiene and safe handling of sharps and contaminated surfaces. This mindset matters because infections can be present even when a patient seems healthy, and not all risks are obvious or known. Other options don't fit as well because ignoring potential exposure is unsafe, using gloves only with known infections misses the possibility of undetected pathogens, and while washing hands after patient contact is essential, it doesn't fully capture the preventive mindset of treating all fluids as potentially infectious and consistently applying protective measures.

8. What is the recommended compression-to-breath ratio for a single rescuer performing CPR on an adult?

A. 15 compressions to 2 breaths

B. 30 compressions to 2 breaths

C. 30 compressions to 1 breath

D. 20 compressions to 2 breaths

For an adult with a single rescuer, the recommended rhythm is 30 compressions followed by 2 breaths. This balance keeps blood flowing effectively while providing enough oxygen to the lungs. Aim for a compression rate of about 100–120 per minute and a depth of about 2 inches (5 cm), allowing full recoil after each compression. After 30 compressions, give two breaths, each lasting about 1 second and producing visible chest rise, then immediately resume compressions. Continue this cycle until the person shows signs of life or professional help arrives. The other ratios are designed for different rescuer situations or would reduce effectiveness for an adult.

9. Which action should be taken when a choking adult becomes unresponsive after abdominal thrusts?

A. Call EMS

B. Check airway

C. Perform abdominal thrusts

D. Start CPR

When choking leads to unresponsiveness, the priority becomes restoring circulation and oxygen delivery. Abdominal thrusts are for a conscious, choking person; once the person is unconscious, you can't effectively clear the obstruction while they're unresponsive. Start CPR immediately to circulate blood and provide breaths if you're trained. Begin chest compressions at a steady rate, and call EMS and obtain an AED as soon as possible. If you're trained to give breaths, after about 30 compressions provide 2 rescue breaths and continue cycles until help arrives or signs of life return. The key is that unresponsiveness switches the focus from relief of the obstruction to performing CPR.

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10. Which symptom may indicate an allergic reaction to a bee sting?

A. Dizziness without breathing problems

B. Chest pain only

C. Difficulty breathing

D. Itchy eyes only

Difficulty breathing is the symptom most consistent with a bee sting–related allergic reaction progressing toward a dangerous, systemic response. When someone is severely allergic to a sting, swelling and tightening of the airways can make it hard to breathe, speak, or swallow, which is a warning sign of anaphylaxis and requires urgent action. The other options—dizziness without breathing problems, chest pain only, or itchy eyes only—may occur with milder reactions or unrelated issues, but they do not by themselves indicate the airway involvement and potential life-threatening reaction seen with a bee sting allergy. If breathing difficulty occurs after a sting, seek emergency help promptly and use any prescribed epinephrine auto-injector if available and you're trained to use it.

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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://stardardfirstaidcpraed.examzify.com

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

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