

NREMT Practice Questions Exercise

INSTRUCTOR KEY

For each of the test questions below, choose the answer you believe is correct. Then complete the table below each question identifying the information you used to make your choice.

1

A 36 year old male was playing basketball and now complains of a dull pain in the center of his chest. His breath sounds are clear bilaterally. His vital signs are B/P 138/82, P 106 and irregular, and R 16. You should

- A. frequently monitor his irregular pulse.
- B. administer oxygen by non-rebreather mask.
- C. monitor his breath sounds for pneumothorax.
- D. ask if he takes nitroglycerin.

Findings in the question	How it impacted your decision
He is 36 years old and playing basketball. Not the profile of a cardiac patient—or one who would have nitroglycerin.	Not choosing the nitroglycerin choice.
Lungs sounds are clear so pneumothorax isn't a good choice. Plus the pain is dull and in the center of his chest. Not traditional pneumothorax pain.	Monitor for pneumothorax has been done and since an unlikely cause, not choosing this one.
Even though there is no oxygen saturation given, his breath sounds are good and there is no mention of respiratory distress. Oxygen isn't the best choice—even if it was, it wouldn't be by non-rebreather.	Oxygen isn't the wonder drug and this patient doesn't need it.

Is there anything in the question you didn't know (terms, conditions)?

2

A 58 year old male complains of chest pain following a short run. His skin is sweaty. His vitals are P 108, R 20, BP 138/82, and SpO2 is 96% on room air. You should first administer

- A. nitroglycerin.
- B. oxygen by non-rebreather mask.
- C. oxygen by nasal cannula.
- D. aspirin

Findings in the question	How it impacted your decision
His oxygen saturation is 96%	Not going to choose oxygen right away. There is no mention of respiratory distress. His general appearance does concern me though.
He is sweaty and tachycardic with chest pain.	This seems like cardiac chest pain. I'm a little concerned about NTG with the tachycardia.
Chest pain came on during exertion.	Combined with the observation above (cardiac pain), aspirin is the first priority—even before NTG and oxygen.

Is there anything in the question you didn't know (terms, conditions)?

3

A 14 year old female collapsed at a drug store after receiving a flu shot. When you arrive she is conscious and alert. Her vital signs are BP 108/78, P 64, R 12. Her SpO2 is 97% on room air. You suspect

- A. anaphylactoid reaction
- B. psychosomatic symptoms
- C. vasovagal syncope
- D. allergic reaction

Findings in the question	How it impacted your decision
She is conscious and alert. Her vitals are great.	She is alert with great vitals. Whatever happened isn't there now.
There is no mention of anything allergy related as far as signs and symptoms (hives, swelling, etc.)	Definitely not picking the allergy-related choices.
She was getting a flu shot.	This may mean she fainted. Syncope is transient and patients recover quickly. Vasovagal syncope = fainting.

Is there anything in the question you didn't know (terms, conditions)?

4

An unresponsive 21-year-old male was shot in the left upper abdominal quadrant. His skin is pale and diaphoretic. You auscultate clear lung sounds, and his neck veins are flat. His vital signs are P 116, R 20, BP 100/72, and SpO₂ is 92% on room air. What type of shock should you suspect?

- A. Obstructive
- B. Cardiogenic
- C. Hemorrhagic
- D. Distributive

Findings in the question	How it impacted your decision
Lung sounds are clear. Neck veins are flat.	This isn't tension pneumothorax or cardiac tamponade. Rules out obstructive shock.
He was shot in the left upper abdominal quadrant.	Bullets can take a weird hop, but even if he was shot in the chest, it would still more likely be hemorrhagic shock.
His skin is pale and diaphoretic.	Probably not distributive—which is very unlikely in trauma anyway except for perhaps some spinal situations and this isn't likely here. Could be his spleen.

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5

Multiple Response Item: Which of the following would be seen in right heart failure? Choose three (3) of the following five (5).

- A. Jugular venous distention
- B. Pedal edema
- C. Pink frothy sputum
- D. Muffled heart sounds
- E. Weight gain

Findings in the question	How it impacted your decision
Jugular venous distention	Right heart failure will cause JVD because blood backs up through the superior vena cava to the neck when the right ventricle fails.
Pedal edema	Blood backs up to where it comes from. Blood also goes to dependent places, making pedal edema likely.
Pink frothy sputum	Involves the lungs – and left heart failure, not right.
Muffled heart sounds	Muffled heart sounds are found in cardiac tamponade.
Weight gain	Fluid is heavy. When it accumulates in the body, patients with right heart failure often feel weight gain.

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