

FALCK ORIENTATION PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://falckorientation.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	15

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.

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!

Questions

SAMPLE

- 1. Is it appropriate to use four-point restraints during transport for a patient on a 5150 hold when safety concerns exist?**
 - A. True
 - B. False
 - C. Only with supervisor approval
 - D. Never

- 2. Which option correctly identifies a Type 2 signature?**
 - A. Authorized representative signature
 - B. Patient signature
 - C. Crew member signature
 - D. Witness signature

- 3. Which device typically delivers the highest concentration of supplemental oxygen among common field devices?**
 - A. Nasal cannula.
 - B. Simple face mask.
 - C. Non-rebreather mask.
 - D. Ambu bag with mask.

- 4. When you are unable to obtain any information on a call, you are to do what?**
 - A. Document the attempt and response in your narrative and explain why you were unable to obtain the information (justification and clarification)
 - B. Ignore
 - C. Ask the patient again
 - D. Call operations for guidance

- 5. Which isolation precautions are used for suspected respiratory infections?**
 - A. Standard Precautions Only
 - B. No Isolation
 - C. Personal Protection Only Gloves
 - D. Droplet or Airborne Isolation as Indicated by Policy; Use Masks (N95 for Airborne), Eye Protection, and Patient Isolation Per Protocol

- 6. Under Falck Red Light Policy, you must come to a complete stop at which of the following?**
- A. Red Lights, Stop Signs, and Red Flashing Lights
 - B. Red Lights only
 - C. Stop Signs only
 - D. Red Flashing Lights only
- 7. What safety steps should you take if you suspect domestic violence?**
- A. Ensure personal safety, separate involved parties if possible, assess for injuries, document findings, and follow reporting duties per policy.
 - B. Confront the offender publicly to stop abuse
 - C. Ignore it if the patient says nothing is wrong
 - D. Only document injuries without reporting
- 8. In emergencies involving a minor, what is the correct approach to consent?**
- A. Obtain consent from a parent/guardian whenever possible, and follow policy for emancipated minors or emergencies.
 - B. Proceed without any consent.
 - C. Only obtain consent if the child can decide.
 - D. Consent is not needed in emergencies.
- 9. If a signature is being collected from a patient and the patient's hands are contaminated, what is the recommended process?**
- A. Refuse to obtain signature
 - B. Have the patient sign with contaminated hands
 - C. Use a mobile consent app
 - D. Clean the patient's hands or place gloves on them before signing and clean the tablet afterwards
- 10. What is the correct order to don PPE in a potential infectious exposure?**
- A. Eye protection
 - B. Gown, mask/eye protection, and gloves
 - C. Mask, gloves, gown
 - D. Gloves, gown, mask

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. Is it appropriate to use four-point restraints during transport for a patient on a 5150 hold when safety concerns exist?

- A. True**
- B. False
- C. Only with supervisor approval
- D. Never

Safety during transport of a patient on a 5150 hold hinges on protecting everyone from imminent harm. When there is a real risk of violence or self-harm, using four-point restraints can be appropriate as a necessary safety measure. The key is that restraints are used within established policies, with medical direction, and for the shortest time needed, while continuously monitoring the patient's circulation, breathing, comfort, and overall condition. They are not a punishment or a first option; they are a last-resort tool when de-escalation fails and the risk warrants protection. Proper documentation, risk assessment, and adherence to oversight or supervisor requirements as dictated by the protocol are essential, but the overarching point is that safety concerns can justify restraint during transport. The statements suggesting it's never appropriate or that it is only acceptable with supervisor approval in every case don't align with the practical safety framework, which recognizes that each situation must be evaluated against policy and the immediate risk.

2. Which option correctly identifies a Type 2 signature?

- A. Authorized representative signature**
- B. Patient signature
- C. Crew member signature
- D. Witness signature

Type 2 signature is the signature of someone authorized to act for the patient when the patient can't sign themselves. In medical forms, this means an authorized representative—like a parent, legal guardian, or designated surrogate—who has the authority to consent or approve actions on the patient's behalf. This ensures the document is valid and respects the patient's rights when they're unable to sign due to age, incapacity, or an emergency. A patient signature would be used if the patient can sign; a witness signature simply confirms that signing occurred or attests to who witnessed it; a crew member signature is internal documentation by staff. So the authorized representative's signature is the correct Type 2 signature.

3. Which device typically delivers the highest concentration of supplemental oxygen among common field devices?

- A. Nasal cannula.
- B. Simple face mask.
- C. Non-rebreather mask.**
- D. Ambu bag with mask.

How much oxygen a device delivers depends on its design and how it limits mixing with room air. The non-rebreather mask uses a reservoir bag and one-way valves, so the patient inhales mainly oxygen from the bag and not ambient air. With adequate flow, this setup can deliver a very high fraction of inspired oxygen, approaching near-total oxygen in ideal conditions, which is why it provides the highest concentration among common field devices. A nasal cannula delivers oxygen through tiny prongs at low flow, and room air mixes in around the gas, giving only a modest FiO₂, typically 24–44%. A simple face mask covers the nose and mouth but lacks a reservoir and valves, so ambient air dilutes the gas, usually producing about 40–60% FiO₂ depending on flow. An ambu bag with a mask can deliver high concentrations when used with a high-flow oxygen source during active ventilation, but during spontaneous breathing its FiO₂ is more variable and often not as consistently high as the non-rebreather mask.

4. When you are unable to obtain any information on a call, you are to do what?

- A. Document the attempt and response in your narrative and explain why you were unable to obtain the information (justification and clarification)**
- B. Ignore
- C. Ask the patient again
- D. Call operations for guidance

When information can't be obtained on a call, the right move is to document the attempt and the response in your narrative and explain why you were unable to obtain the information (justification and clarification). This creates a clear, accountable record of what was sought, what happened, and the reasons for the missing data, which is essential for patient safety and continuity of care. In your note, capture what information was sought, who you tried to contact, when the attempt occurred, and what barriers prevented a response (unavailable contact, patient refusal, privacy constraints, etc.). Also include any steps you took to resolve the issue and why they didn't succeed. If there's a need for escalation, you can note that you sought guidance from a supervisor or operations, but the primary action shown in the record is explaining the gap and the rationale for it. This approach helps others understand the situation and supports proper follow-up and accountability.

5. Which isolation precautions are used for suspected respiratory infections?

- A. Standard Precautions Only
- B. No Isolation
- C. Personal Protection Only Gloves
- D. Droplet or Airborne Isolation as Indicated by Policy; Use Masks (N95 for Airborne), Eye Protection, and Patient Isolation Per Protocol**

When dealing with a suspected respiratory infection, you protect by using transmission-based precautions that match how the illness spreads. Respiratory pathogens can spread through droplets and, for some diseases, via airborne particles that linger in the air, so you implement droplet or airborne isolation as the policy directs. Wear the appropriate PPE: use a mask for patient contact, add eye protection to guard the eyes, and use an N95 respirator when airborne precautions apply. Place the patient in isolation per protocol (often a single room, with negative-pressure containment if airborne). Standard precautions are always in place, but they aren't enough on their own for suspected respiratory infections because they don't address the specific routes of transmission. Following policy ensures coverage of both the transmission mode and the necessary protections.

6. Under Falck Red Light Policy, you must come to a complete stop at which of the following?

- A. Red Lights, Stop Signs, and Red Flashing Lights
- B. Red Lights only
- C. Stop Signs only
- D. Red Flashing Lights only**

The key idea here is recognizing which signal in Falck's Red Light Policy requires a full stop. Red flashing lights are treated as a specific indicator of a hazard or controlled area where traffic could move unpredictably, so you must come to a complete stop to assess the situation and ensure it's safe before proceeding. Solid red lights and stop signs follow standard traffic rules, but this policy emphasizes that a full stop is required specifically at red flashing lights. So the correct behavior is to stop completely when you encounter red flashing lights.

7. What safety steps should you take if you suspect domestic violence?

- A. Ensure personal safety, separate involved parties if possible, assess for injuries, document findings, and follow reporting duties per policy.**
- B. Confront the offender publicly to stop abuse
- C. Ignore it if the patient says nothing is wrong
- D. Only document injuries without reporting

Prioritize safety for you and for the patient, then gather essential information in a calm, controlled way. The best approach is to first ensure personal safety: be mindful of your surroundings, avoid escalating the situation, and position yourself so you can exit if needed. If the environment feels unsafe, seek assistance or back away. If it's safe to do so, separate the involved parties. A calm, private space helps reduce tension and lowers the risk of further harm during assessment. This separation also makes it easier to speak with the person who may be affected about what happened without pressure from the other party. Next, assess for injuries. Look for visible injuries and be attentive to signs that may not be immediately apparent. Ask open, nonleading questions and listen carefully. Your goal is to determine if anyone has been harmed and what immediate medical needs there may be, while preserving the person's dignity and safety. Document your findings. Record objective observations, times, locations, and the conditions you observed. Note any statements the patient makes about the incident. Documentation creates a clear record that can support care decisions and, if needed, future steps. If allowed and appropriate, take photos of injuries according to policy and privacy rules. Always follow reporting duties per policy. Report to the appropriate supervisor or authorities as required by law and organizational policy. Mandatory reporting protects the patient and ensures access to help and resources, while also safeguarding you legally and professionally. Keep information confidential and handle it with care, sharing only what is necessary with the right channels. Confronting the offender publicly, ignoring concerns, or documenting without reporting do not align with safe, compliant practice. Public confrontation can escalate danger; ignoring potential abuse leaves the patient without needed protection and support; and failing to report when required may violate policy and laws.

8. In emergencies involving a minor, what is the correct approach to consent?

- A. Obtain consent from a parent/guardian whenever possible, and follow policy for emancipated minors or emergencies.**
- B. Proceed without any consent.
- C. Only obtain consent if the child can decide.
- D. Consent is not needed in emergencies.

In emergencies with a minor, the main idea is to involve a parent or guardian and follow established policies. Obtain consent from a parent or guardian whenever possible because they have the legal authority to decide on medical care for the child. If no parent or guardian is available and delaying treatment would risk serious harm, follow your agency's policy that allows care under implied consent for emergencies. If the minor is emancipated, they may consent for themselves according to the policy and applicable law. This approach ensures appropriate authority is respected while enabling timely care when time is critical. Options that say to proceed without consent, or only obtain consent if the child can decide, or that consent isn't needed in emergencies, don't fit because they ignore legal and ethical requirements and the usual emergency protocols that guide when and how consent is obtained.

9. If a signature is being collected from a patient and the patient's hands are contaminated, what is the recommended process?

- A. Refuse to obtain signature
- B. Have the patient sign with contaminated hands
- C. Use a mobile consent app
- D. Clean the patient's hands or place gloves on them before signing and clean the tablet afterwards**

Infection control and device hygiene are the priority when a patient's hands are contaminated. You want to prevent transferring any pathogens to the signing device and to anyone who handles it. The best approach is to either clean the patient's hands or have them wear clean gloves before signing, and then disinfect the tablet or signing interface afterward. This minimizes the chance of contamination during the signing step and after, protecting both the patient and staff. If gloves are used, dispose of them properly and perform hand hygiene as needed, and wipe the device with an appropriate, electronics-safe disinfectant after the signature is captured. Refusing to obtain a signature or asking the patient to sign with contaminated hands would risk infection transmission and compromise the integrity of the consent process. A mobile app can be helpful, but it does not by itself eliminate contamination; cleaning the hands or using gloves and cleaning the device remains essential.

10. What is the correct order to don PPE in a potential infectious exposure?

- A. Eye protection
- B. Gown, mask/eye protection, and gloves
- C. Mask, gloves, gown**
- D. Gloves, gown, mask

The main idea is to don PPE in an order that builds protective barriers from the outside in, while minimizing self-contamination. The sequence commonly taught is to start with a gown to protect clothing and skin, then put on a mask or respirator to shield the airway, followed by eye protection if needed, and finally gloves. This order keeps your clean hands away from contaminated surfaces as you add each layer, and it ensures the most exposed areas are covered first and the barrier surfaces you touch most often remain as clean as possible. Remember to perform hand hygiene before donning gloves and after removing PPE. The option that lists placing the mask first, then gloves, then gown would put the gown on last, which can increase the risk of contaminating clothing and surfaces during the process. That's why standard practice emphasizes putting the gown on first to establish the outer protective barrier, then the rest of the PPE. If your course presents a different sequence, follow its protocol, but the underlying principle remains: protect yourself by layering from outer to inner while maintaining clean technique.

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://falckorientation.examzify.com>

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

SAMPLE