FIELD MEDICAL TRAINING BATTALION – EAST (FMTB-E) CLASS 24040 ANNEX A PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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

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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 mass casualty battlefield scenarios, which triage method is widely used?

A. Simple Triage and Rapid Treatment

B. SALT Triage Method

C. START-Plus

D. Priority-based Triage System

2. Hemostatic dressings are most beneficial in which scenario?

A. Deep or junctional bleeding requiring rapid control when standard gauze is insufficient

B. Superficial bleeding

C. Bleeding from a closed fracture

D. All wounds equally

3. What is a SAM splint and when is it used?

A. A rigid metal rod used for all splinting.

B. A foam pad for cushioning only.

C. A flexible fabric tape used to wrap fractures.

D. A collapsible, moldable splint used to immobilize fractures; can be shaped around injuries and secured.

4. The Geneva Conventions for the Protection of War Victims were ratified in which year?

A. 1945

B. 1949

C. 1950

D. 1962

5. What are the missions of the USMC?

A. Aid the Navy in protecting naval facilities and other important military/political installations, and perform any other duties the President may elect.

B. Patrol coastal waters and enforce maritime law worldwide.

C. Conduct only domestic disaster relief missions within the United States.

D. Lead all air combat operations in time of war.

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6. Which statement about prophylactic antibiotics in battlefield injuries is most accurate?

A. They cure established infections

B. They are required in all patients

C. They prevent antibiotic resistance

D. They reduce risk of infection and sepsis in contaminated wounds

7. What is the first action in casualty assessment at the scene?

A. Check for pulses only.

B. Move the casualty to a safe area before assessing.

C. Ensure scene safety, then perform a rapid primary survey focusing on airway, breathing, and circulation.

D. Call for additional resources.

8. The POW rights total equals how many?

A. 12

B. 10

C. 14

D. 8

9. Where is the 2nd MAW located?

A. Cherry Point, NC

B. Camp Lejeune, NC

C. Camp Pendleton, CA

D. Okinawa, Japan

10. Regular scenario-based training is important because it improves all of the following except:

A. Decisions under stress

B. Speed of action

C. Teamwork

D. Vehicle maintenance skills

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Answers

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

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Explanations

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1. In mass casualty battlefield scenarios, which triage method is widely used?

A. Simple Triage and Rapid Treatment

B. SALT Triage Method

C. START-Plus

D. Priority-based Triage System

In mass casualty battlefield scenarios, you need a triage approach that is fast, simple, and doable with minimal equipment. Simple Triage and Rapid Treatment fits that need because it guides you through a quick, repeatable sequence that sorts a large number of casualties into priority groups and directs action right away. The method starts by quickly identifying those who can walk. If a person can move on their own, they're considered minor and moved out of the immediate scene so you can focus on more severely injured patients. For everyone who cannot walk, you perform a rapid assessment using only a few basic checks: is the person breathing after ensuring an open airway? If they are not breathing, you open the airway and recheck. If they still aren't breathing, they're prioritized for lifesaving interventions or, in the harshest cases, tagged as needing immediate attention due to the potential for survival with quick treatment. If the casualty is breathing, you then assess circulation by feeling for a pulse. If there's no pulse, that person is prioritized for immediate care because circulation is lost and time is critical. If a pulse is present, you evaluate mental status by asking the person to follow simple commands. Inability to follow commands indicates a higher urgency, so that casualty receives attention sooner rather than later. Those who can follow commands and show stable vital signs generally fall into a lower priority category, allowing responders to allocate scarce resources to the most life-threatening cases first. This streamlined process enables responders to rapidly distinguish between immediate, delayed, minor, and nonviable (expectant) casualties in chaotic, resource-limited environments, which is why it is widely taught and used in mass casualty settings.

2. Hemostatic dressings are most beneficial in which scenario?

A. Deep or junctional bleeding requiring rapid control when standard gauze is insufficient

B. Superficial bleeding

C. Bleeding from a closed fracture

D. All wounds equally

Hemostatic dressings are used when external bleeding is severe enough that plain gauze won't stop it quickly. They contain agents that accelerate clot formation at the wound surface, enabling rapid control of hemorrhage. This makes them especially valuable for deep wounds or junctional areas (like the groin or armpit) where a tourniquet may be hard to apply or insufficient on its own. The best scenario for using a hemostatic dressing is deep or junctional bleeding requiring fast control when standard gauze isn't doing the job. Minor, superficial bleeding is usually managed with direct pressure and regular gauze, not these dressings. Bleeding from a closed fracture often involves internal injury and isn't the typical context for external hemostatic dressings, and not all wounds require this intervention.

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3. What is a SAM splint and when is it used?

A. A rigid metal rod used for all splinting.

B. A foam pad for cushioning only.

C. A flexible fabric tape used to wrap fractures.

D. A collapsible, moldable splint used to immobilize fractures; can be shaped around injuries and secured.

A SAM splint is a collapsible, moldable splint used to immobilize fractures; it can be shaped around injuries and secured to hold the limb steady. In practice, you unfold and mold the splint to the contours of the injured area, bend it to support joints as needed, and then secure it with tape or a bandage to keep it in place. This versatility makes it useful for a wide range of injuries, from suspected fractures of the arm or leg to sprains, during emergency care and transport. It's not a rigid metal rod, not merely a foam pad for padding, and not just a wrap or tape used to hold a fracture—those options don't provide the same molded, immobilizing support the SAM splint offers.

4. The Geneva Conventions for the Protection of War Victims were ratified in which year?

A. 1945

B. 1949

C. 1950

D. 1962

These agreements were produced after World War II to set formal protections for those affected by war. They were negotiated and opened for signature in 1949, with many nations signing and ratifying the text that same year. The ratifications then proceeded in the following period, and the conventions entered into force in 1950. Because the question asks when they were ratified, 1949 is the year most closely associated with the ratification process for these treaties.

5. What are the missions of the USMC?

A. Aid the Navy in protecting naval facilities and other important military/political installations, and perform any other duties the President may elect.

B. Patrol coastal waters and enforce maritime law worldwide.

C. Conduct only domestic disaster relief missions within the United States.

D. Lead all air combat operations in time of war.

The main idea being tested is how the Marine Corps functions as an expeditionary force that supports the Navy by securing naval bases and key installations, while remaining ready to take on missions assigned by civilian leadership. The best choice describes the Marines aiding the Navy in protecting naval facilities and other important military or political installations, and performing any other duties the President may elect. This captures the Marines' role as a rapid, sea-based force that can project power, protect critical sites, and execute tasks directed by national leadership to meet strategic objectives. The other options describe roles more appropriate to the Coast Guard (patrolling/coastal law enforcement), domestic disaster relief as an exclusive mission, or the Air Force's lead in air combat—none of which align with the Marine Corps' broad, expeditionary mission.

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6. Which statement about prophylactic antibiotics in battlefield injuries is most accurate?

A. They cure established infections

B. They are required in all patients

C. They prevent antibiotic resistance

D. They reduce risk of infection and sepsis in contaminated wounds

Prophylactic antibiotics in battlefield injuries are used to prevent infection in wounds that are contaminated or at high risk for infection by reducing the bacterial load early after injury. They are not a cure for established infections, and they are not automatically required for every patient or wound. When used appropriately, they help prevent wound infection and progression to sepsis, especially in open, contaminated wounds where tissue is devitalized or exposure to soil and environmental bacteria is likely. Timing and duration matter: antibiotics should be given promptly as part of initial wound management and continued for a limited, evidence-based period to minimize the chance of promoting antibiotic resistance. They do not prevent resistance by themselves; resistance is more likely to rise with unnecessary or prolonged use.

7. What is the first action in casualty assessment at the scene?

A. Check for pulses only.

B. Move the casualty to a safe area before assessing.

C. Ensure scene safety, then perform a rapid primary survey focusing on airway, breathing, and circulation.

D. Call for additional resources.

The first action is to ensure the scene is safe for you and the casualty, then move directly into a rapid primary survey focused on airway, breathing, and circulation. Safety comes first because you can't effectively help someone if you or others are at risk, and you need a stable environment to assess and treat. After safety is established, a quick primary survey quickly identifies the most immediate life threats: is the airway open and unobstructed, is the person breathing adequately, and is circulation compromised (for example, due to severe bleeding or shock)? If any of these are compromised, you intervene right away—open the airway if needed, provide ventilation, control bleeding, or start CPR as indicated. Choosing anything that suggests only checking pulses misses critical steps in the airway and breathing assessment, and moving the casualty before assessing can cause further harm. Calling for help is important, but it isn't the first action in the assessment sequence.

8. The POW rights total equals how many?

A. 12

B. 10

C. 14

D. 8

POW rights are a fixed set of protections that must be afforded to prisoners of war. In this material, these protections are listed as twelve distinct rights, so the total is twelve. The other numbers don't match the defined enumeration here: ten would omit two rights, eight would omit four, and fourteen would add two beyond the listed set.

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9. Where is the 2nd MAW located?

A. Cherry Point, NC

B. Camp Lejeune, NC

C. Camp Pendleton, CA

D. Okinawa, Japan

The main idea here is knowing where the second Marine Aircraft Wing is based. The second MAW is headquartered at Marine Corps Air Station Cherry Point in North Carolina. This base serves as the East Coast aviation hub for the Marine Corps and houses the wing's headquarters and many of its squadrons. The other locations listed are associated with different units or functions (ground bases or other wings), so they are not the home for the second MAW.

10. Regular scenario-based training is important because it improves all of the following except:

A. Decisions under stress

B. Speed of action

C. Teamwork

D. Vehicle maintenance skills

Regular scenario-based training places you in realistic, time-pressured medical situations where quick, accurate decisions matter, actions must be carried out efficiently, and team coordination is essential. This environment sharpens decision-making under stress because you're constantly evaluating symptoms, prioritizing interventions, and adapting to changing conditions. It also builds speed of action as practiced sequences and protocols become automatic responses, reducing hesitation between assessment and treatment. Teamwork improves through clearly defined roles, clear communication, and coordinated efforts under pressure, which mirrors real-world missions. Vehicle maintenance skills, on the other hand, involve mechanical upkeep, diagnosing vehicle systems, preventive maintenance, and troubleshooting—areas learned best through hands-on maintenance drills and technical procedures rather than medical scenario drills. While scenarios might reference the need for a functioning vehicle, the actual maintenance capabilities are not developed in scenario-based medical training. So scenario-based training enhances decisions under stress, speed of action, and teamwork, but not vehicle maintenance skills.

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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://fmtbeclass24040annexa.examzify.com

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

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