JONES & BARTLETT LEARNING (JBL) MODULE 5 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. The severity of bleeding should be based on all of the following findings, EXCEPT:

A. clinical signs and symptoms.

B. poor general appearance.

C. the mechanism of injury.

D. systolic blood pressure.

2. Which open soft-tissue injury is limited to the superficial layer of the skin and results in the least amount of blood loss?

A. Abrasion

B. Avulsion

C. Laceration

D. Incision

3. When approaching a patient with severe leg bleeding, what is the first action you should take?

A. Administer oxygen.

B. Check for a pulse.

C. Open the airway.

D. Control the bleeding.

4. A 28-year-old male struck in the chest during an altercation is conscious with severe chest pain, a large area of ecchymosis over the sternum, and a rapid, irregular pulse. In addition to providing supplemental oxygen, you should:

A. Apply bulky dressings to the sternum.

B. Prepare for immediate transport.

C. Determine if he has cardiac problems.

D. Apply an AED and assess his BP.

5. Children are often 'belly breathers' because _____.

A. Their intercostal muscles are not developed.

B. They are consciously controlling ventilations.

C. Their diaphragm is not functional.

D. They are routinely hypoxic.

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6. Which three response domains are assessed by the Glasgow Coma Scale (GCS)?

A. eye opening, verbal response, and motor response

B. verbal response, eye opening, and mental status

C. sensory response, pupil reaction, and heart rate

D. mental status, eye opening, and respiratory rate

7. Which landmark is used to palpate the superficial temporal artery?

A. just anterior to the tragus

B. over the mastoid process

C. slightly above the ear

D. at the angle of the jaw

8. Which statement describes the reason for keeping protruding organs warm and moist in the field?

A. To reduce infection risk only

B. To prevent rapid cooling and tissue damage

C. To allow faster packaging

D. To avoid contamination

9. Which option best reflects the body's primary responses to stop bleeding?

A. Vasoconstriction

B. Clotting

C. Coagulation

D. All of these answers are correct.

10. A 4-year-old female has a peanut lodged in the external auditory canal of her right ear. What is the best course of action?

A. Thoroughly flush her ear with sterile saline

B. Transport her to the Emergency Department

C. Use tweezers to try to remove the object

D. Remove the peanut with a cotton-tipped swab

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Answers

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

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Explanations

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1. The severity of bleeding should be based on all of the following findings, EXCEPT:

A. clinical signs and symptoms.

B. poor general appearance.

C. the mechanism of injury.

D. systolic blood pressure.

The amount of bleeding is judged by how the patient looks and behaves and by what caused the injury, not by a single blood pressure reading. Clinical signs and symptoms reveal how well perfusion is maintained and whether blood loss is ongoing (for example, dizziness, fainting, rapid or weak pulse, sweating). Poor general appearance, such as pallor or cool, clammy skin, also indicates compromised perfusion from blood loss. The mechanism of injury helps anticipate the likelihood and potential extent of bleeding based on the forces involved (high energy trauma or penetrating wounds can produce concealed hemorrhage even if external signs are mild). Systolic blood pressure, while important, is a late or unreliable sole indicator of bleeding severity because the body can compensate early on, keeping BP normal despite significant blood loss. Therefore, bleeding severity is best assessed using signs and symptoms, general appearance, and mechanism of injury, not systolic blood pressure alone.

2. Which open soft-tissue injury is limited to the superficial layer of the skin and results in the least amount of blood loss?

A. Abrasion

B. Avulsion

C. Laceration

D. Incision

The key idea is how deep the skin injury goes. An abrasion stays at the surface, affecting only the epidermis (and perhaps a very superficial dermal layer). Because it doesn't disrupt deeper blood vessels, bleeding is minimal. That's why it has the least blood loss among common open skin injuries. In contrast, an avulsion involves tearing away tissue, often producing a flap and more significant bleeding. A laceration is a tearing wound that can reach deeper into the dermis and underlying tissues, again with more potential bleeding. An incision is a clean-cut wound from a sharp object; depending on depth, it can involve deeper vessels and bleed more than a superficial abrasion.

3. When approaching a patient with severe leg bleeding, what is the first action you should take?

A. Administer oxygen.

B. Check for a pulse.

C. Open the airway.

D. Control the bleeding.

Controlling the bleeding is the first priority because life-threatening blood loss can kill quickly. Start by applying direct pressure to the wound with a clean dressing or gauze, using enough force to slow or stop the flow. If blood soaks through, leave the initial dressing in place and add more dressings on top rather than removing them. If direct pressure doesn't stop the bleeding and you're trained to do so, consider a tourniquet placed above the wound to halt blood flow. Oxygen and airway actions are still important, but they're not the immediate step when there's a severe external bleed—the bleeding must be addressed first to prevent progression to shock. Checking for a pulse is part of assessing circulation, but in the moment of active hemorrhage the priority is stopping the bleed. After bleeding is controlled, continue with the full assessment (airway, breathing, circulation) and provide oxygen if there are signs of hypoxia or shock.

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4. A 28-year-old male struck in the chest during an altercation is conscious with severe chest pain, a large area of ecchymosis over the sternum, and a rapid, irregular pulse. In addition to providing supplemental oxygen, you should:

A. Apply bulky dressings to the sternum.

B. Prepare for immediate transport.

C. Determine if he has cardiac problems.

D. Apply an AED and assess his BP.

The main idea is that chest trauma with severe pain and signs like sternum ecchymosis and a rapid, irregular pulse requires rapid transport to definitive care after providing oxygen. In the field, you stabilize and support breathing, then move the patient to a facility where they can definitively evaluate and treat potential life-threatening injuries such as cardiac contusion, pneumothorax, or tamponade. Waiting to "determine if he has cardiac problems" isn't practical or reliable in the prehospital setting, and delaying transport can worsen outcomes. Bulky dressings over the sternum don't address the underlying injury and could hinder assessment and transport. An AED is for someone without a pulse; this patient currently has a pulse, so defibrillation isn't indicated now. Transport allows continuous monitoring, IV access, imaging, and treatment that can only be provided in an emergency department.

5. Children are often 'belly breathers' because _____.

A. Their intercostal muscles are not developed.

B. They are consciously controlling ventilations.

C. Their diaphragm is not functional.

D. They are routinely hypoxic.

In children, breathing is driven mainly by the diaphragm because their intercostal muscles are not fully developed. The diaphragm contracts to push the abdominal contents downward, which makes the abdomen expand with each breath. Since the rib cage muscles aren't yet strong, there's less chest expansion and more abdominal movement, so it looks like belly breathing. As kids grow and their intercostal muscles strengthen, chest movements become more noticeable and breathing shifts toward a combination of abdominal and chest patterns. Consciously controlling ventilation isn't typical in normal, resting breathing for children, and the diaphragm is active and functional—not nonfunctional. Hypoxia isn't the reason kids exhibit belly breathing in general.

6. Which three response domains are assessed by the Glasgow Coma Scale (GCS)?

A. eye opening, verbal response, and motor response

B. verbal response, eye opening, and mental status

C. sensory response, pupil reaction, and heart rate

D. mental status, eye opening, and respiratory rate

The Glasgow Coma Scale measures level of consciousness by looking at how a person responds in three areas: eye opening, verbal response, and motor response. Each area is scored separately to reflect different aspects of brain function. Eye opening is scored from 1 to 4, with 4 meaning eyes open spontaneously. Verbal response is scored from 1 to 5, with higher scores for more coherent and oriented speech. Motor response is scored from 1 to 6, with higher scores for purposeful movements or the ability to follow commands. The total score ranges from 3 to 15, where a higher total indicates better neurological function. Other cues like sensory response, pupil reaction, heart rate, or respiratory rate aren't part of the GCS scoring, so they don't contribute to the scale.

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7. Which landmark is used to palpate the superficial temporal artery?

A. just anterior to the tragus

B. over the mastoid process

C. slightly above the ear

D. at the angle of the jaw

The pulse of the superficial temporal artery is best felt in the temple area where the artery runs just in front of the ear. To palpate it reliably, place your fingers just anterior to the tragus, where the artery lies superficial to the temporalis muscle as it crosses the zygomatic arch. This point is the most consistent landmark because it sits directly along the artery's course. Palpating over the mastoid process is behind the ear and away from the artery's path, so it wouldn't reliably reveal the pulse. The area slightly above the ear and near the jaw line is not as precise to locate the artery, which is why the front-of-tragus location is preferred.

8. Which statement describes the reason for keeping protruding organs warm and moist in the field?

A. To reduce infection risk only

B. To prevent rapid cooling and tissue damage

C. To allow faster packaging

D. To avoid contamination

Preserving tissue viability by preventing rapid cooling and drying of protruding organs. Exposed tissue loses heat quickly and moisture evaporates, which can cause cell injury and tissue death. Keeping the organs warm and moist slows these processes, helping maintain viability until definitive care can be provided. While infection control matters, the primary reason here is preventing rapid cooling and tissue damage. In field care, cover the protruding organs with sterile, moist dressings and avoid letting them dry, then seek urgent medical help.

9. Which option best reflects the body's primary responses to stop bleeding?

A. Vasoconstriction

B. Clotting

C. Coagulation

D. All of these answers are correct.

When the body stops bleeding, several overlapping mechanisms come into play. First, blood vessels constrict to narrow the damaged area, reducing blood flow and slowing loss. Next, platelets rush to the injury and stick together to form a temporary plug at the site of damage (this is the clotting part). At the same time, a coagulation cascade activates to convert fibrinogen into fibrin, producing a stable mesh that reinforces and protects the platelet plug. These steps work together to halt bleeding quickly and then securely. Because vasoconstriction, clotting, and coagulation all contribute to stopping the bleed, the option that includes all of these responses is the best choice.

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10. A 4-year-old female has a peanut lodged in the external auditory canal of her right ear. What is the best course of action?

A. Thoroughly flush her ear with sterile saline

B. Transport her to the Emergency Department

C. Use tweezers to try to remove the object

D. Remove the peanut with a cotton-tipped swab

The situation centers on safely removing a foreign body from a child's external ear without causing further injury. A peanut lodged in the ear canal is an organic object that can swell when moistened and is more likely to worsen if manipulated improperly. Because field removal with instruments like tweezers or cotton-tipped swabs risks pushing the object deeper, causing trauma to the ear canal, or leaving behind fragments, the best course is to transport the child to the emergency department where trained clinicians can visualize the canal with an otoscope and remove the object with appropriate tools, and assess for complications such as tympanic membrane injury or infection. In the ED, removal can be done safely, using suction or specialized atraumatic forceps, and under proper assessment of the ear.

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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://jblmodule5.examzify.com

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

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