

29 Hour Joint Knowledge Online (JKO) Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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.

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

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- 1. Which agent has foodborne gastrointestinal infections as one of its forms?**
 - A. Anthrax**
 - B. Anthrax**
 - C. Shigella**
 - D. Listeria**

- 2. Naturally occurring outbreaks of food- and waterborne disease and agricultural diseases have occurred from contamination with**
 - A. All Of The Above**
 - B. Bacteria**
 - C. Virus**
 - D. Parasites**

- 3. In livestock on farms with known *C. burnetii* activity, which reproductive outcome is commonly observed?**
 - A. Spontaneous abortions in livestock**
 - B. Diarrhea in calves**
 - C. Neonatal convulsions**
 - D. Hair loss in ewes**

- 4. *C. burnetii* is a facultative intracellular coccobacillus. Once inhaled and trapped in the lungs, intracellular survival in what cell type is important in the pathogenesis of Q fever?**
 - A. Monocytes**
 - B. Neutrophils**
 - C. Erythrocytes**
 - D. Platelets**

- 5. *C. burnetii* is a bacterium with which characteristics?**
 - A. Gram-positive spore-forming rod**
 - B. Obligate intracellular coccobacillus**
 - C. Obligate extracellular cocci**
 - D. Facultative intracellular coccobacillus**

- 6. Francisella tularensis is the causative agent of which disease?**
- A. Bacillus Anthracis**
 - B. Yersinia Pestis**
 - C. Francisella Tularensis**
 - D. Clostridium Botulinum**
- 7. When should hand washing be performed?**
- A. Before patient contact**
 - B. All of the above**
 - C. After patient contact**
 - D. During patient contact**
- 8. After inhalation, which cell type is involved in the intracellular survival of C. burnetii?**
- A. Erythrocytes are the primary reservoir**
 - B. Monocytes are involved in intracellular survival**
 - C. Neurons are infected**
 - D. Platelets mediate persistence**
- 9. How often should airflow be checked for a PAPR system?**
- A. Daily**
 - B. Weekly**
 - C. Monthly**
 - D. Before each use**
- 10. Which biosafety level is indicated for the suite?**
- A. BSL-1**
 - B. BSL-2**
 - C. BSL-3**
 - D. BSL-4**

Answers

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

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Explanations

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1. Which agent has foodborne gastrointestinal infections as one of its forms?

- A. Anthex**
- B. Anthrax**
- C. Shigella**
- D. Listeria**

Foodborne gastrointestinal infections occur when a microbe in contaminated food or water irritates and inflames the gut, causing diarrhea and cramping. Shigella fits this pattern best because it spreads easily through the fecal-oral route via contaminated food or water and has a very low infectious dose, so even small amounts can cause illness. Once in the intestine, Shigella invades the lining and can produce toxins that drive inflammatory, sometimes bloody, diarrhea—the hallmark of shigellosis. This makes it the classic agent associated with foodborne GI infections. Listeria can also be acquired from contaminated food, but it's more notable for invasive disease in pregnant women, newborns, and the immunocompromised, rather than a typical foodborne gastroenteritis. Anthrax in its common forms is not a primary foodborne gut infection, and the unrecognized name listed isn't a standard pathogen.

2. Naturally occurring outbreaks of food- and waterborne disease and agricultural diseases have occurred from contamination with

- A. All Of The Above**
- B. Bacteria**
- C. Virus**
- D. Parasites**

Outbreaks of illness from food, water, and agricultural sources can be caused by a variety of pathogens that contaminate what we eat, drink, or grow. Bacteria such as Salmonella, Campylobacter, and E. coli are common culprits in foodborne cases, often spreading through contaminated meat, dairy, produce, or surfaces. Viruses like Norovirus and Hepatitis A can contaminate water or foods and spread via infected handlers, making them a frequent source of outbreaks. Parasites such as Giardia and Cryptosporidium can pollute water used for drinking or irrigation and also contaminate produce. Because each of these pathogen types has been linked to natural outbreaks in food, water, and agricultural contexts, contamination can involve all of the above. All of the above.

3. In livestock on farms with known *C. burnetii* activity, which reproductive outcome is commonly observed?

- A. Spontaneous abortions in livestock**
- B. Diarrhea in calves**
- C. Neonatal convulsions**
- D. Hair loss in ewes**

Coxiella burnetii infection in ruminants most often shows up as reproductive failure, with spontaneous abortions occurring in late pregnancy. The bacteria localize in the placenta and fetal membranes, triggering placentitis and abortion, and the birth materials shed large amounts of the organism into the environment. This pattern—abortion storms and high abortion rates among pregnant animals—is the typical reproductive outcome on farms with known *C. burnetii* activity. Other options don't fit the typical disease presentation: diarrhea in calves points to enteric pathogens, neonatal convulsions aren't a usual feature of this infection, and hair loss in ewes isn't associated with *C. burnetii*.

4. *C. burnetii* is a facultative intracellular coccobacillus. Once inhaled and trapped in the lungs, intracellular survival in what cell type is important in the pathogenesis of Q fever?

- A. Monocytes**
- B. Neutrophils**
- C. Erythrocytes**
- D. Platelets**

Coxiella burnetii relies on living and multiplying inside macrophage-lineage cells. After inhalation, it targets alveolar macrophages and then uses the macrophage/monocyte as its niche, thriving in the phagolysosome and enabling long-range dissemination through the bloodstream to organs like the liver and spleen. This intracellular survival in monocytes is what drives the pathogenesis of Q fever. Among the options, monocytes fit this niche best because they differentiate into macrophages, which are the primary cells *Coxiella* infects and replicates within during disease. Neutrophils are rapid, short-lived responders that don't serve as a replication niche for *Coxiella*. Erythrocytes lack nuclei and phagolysosomal compartments, so they aren't hosts for intracellular replication. Platelets are not host cells for bacterial replication either.

5. *C. burnetii* is a bacterium with which characteristics?

- A. Gram-positive spore-forming rod**
- B. Obligate intracellular coccobacillus**
- C. Obligate extracellular cocci**
- D. Facultative intracellular coccobacillus**

Coxiella burnetii shows a dual lifestyle: it can survive outside cells and also replicate inside cells, so it's best described as a facultative intracellular coccobacillus. In the environment, it forms environmentally resistant small cell variants that endure desiccation and aerosols, which helps transmission. Inside a host, it is taken up by macrophages and replicates within acidic phagolysosomes, producing large cell variants that drive intracellular growth. It's a Gram-negative, pleomorphic coccobacillus, not a Gram-positive spore-forming rod and not strictly extracellular or strictly intracellular. That combination of extracellular survival and intracellular replication is why the facultative intracellular description fits best.

6. Francisella tularensis is the causative agent of which disease?

- A. Bacillus Anthracis**
- B. Yersinia Pestis**
- C. Francisella Tularensis**
- D. Clostridium Botulinum**

Understanding which disease a pathogen causes is about linking the organism to the clinical syndrome it produces. *Francisella tularensis* is the bacterium responsible for tularemia, a zoonotic infection that can be transmitted by ticks and other biting insects or by handling infected wildlife. It's highly infectious and can present in several forms, such as ulceroglandular or pneumonic tularemia, depending on how exposure occurs. The other organisms are tied to different diseases: *Bacillus anthracis* causes anthrax, *Yersinia pestis* causes plague, and *Clostridium botulinum* causes botulism. So, the disease caused by *Francisella tularensis* is tularemia.

7. When should hand washing be performed?

- A. Before patient contact**
- B. All of the above**
- C. After patient contact**
- D. During patient contact**

Hand hygiene is needed at every critical point in patient care to prevent the spread of infection. You should wash before touching a patient to protect them from any organisms on your hands, during care if your hands become contaminated or you're switching tasks, and after finishing with the patient to remove any organisms you may have picked up. Because each of these moments poses a transmission risk, the best practice is to wash in all of these situations. In practice, you'll use soap and water when hands are visibly dirty or contamination is likely, and alcohol-based hand rub is usually fine when hands aren't visibly dirty. Also remember that gloves don't replace hand hygiene—you should clean your hands before putting on gloves, between patient contacts, and after removing gloves.

8. After inhalation, which cell type is involved in the intracellular survival of *C. burnetii*?

- A. Erythrocytes are the primary reservoir**
- B. Monocytes are involved in intracellular survival**
- C. Neurons are infected**
- D. Platelets mediate persistence**

Coxiella burnetii is an obligate intracellular bacterium that relies on cells of the mononuclear phagocyte system as its niche. After inhalation, it's taken up by alveolar macrophages and then survives and replicates inside the phagolysosome, with monocytes in the bloodstream carrying the bacteria to reticuloendothelial tissues. This dependence on monocytes/macrophages is why this cell type is the best choice. Erythrocytes don't perform phagocytosis and don't serve as intracellular reservoirs; neurons aren't typical hosts; platelets aren't known to harbor intracellular survival of this organism.

9. How often should airflow be checked for a PAPR system?

- A. Daily
- B. Weekly
- C. Monthly
- D. Before each use**

Ensuring the PAPR delivers adequate airflow before every use is essential. PAPRs rely on a continuous flow to create positive pressure inside the hood, which helps keep contaminants out. If airflow drops—even briefly—because of a low battery, a kinked hose, a clogged filter, or a loose connection, protection can be compromised. A quick pre-use airflow check catches these issues right before you work, confirming the blower is running properly, the flow rate is within the required range, and there are no alarms. While daily, weekly, or monthly maintenance checks are still important for overall device care, they don't guarantee safe performance at the moment you put the system on; a pre-use check ensures readiness for that specific use.

10. Which biosafety level is indicated for the suite?

- A. BSL-1
- B. BSL-2
- C. BSL-3**
- D. BSL-4

Work with pathogens that can cause serious or lethal disease, especially via inhalation, requires containment beyond basic lab safety. BSL-3 is designed for that level of risk. It uses controlled access, directional airflow with negative pressure, and engineering controls like biosafety cabinets for aerosol-generating procedures. Personnel wear appropriate PPE and training plus medical surveillance is part of the setup, with strict decontamination and waste procedures. This level provides more protection than BSL-1 or BSL-2, which cover lower-risk organisms, but it isn't as extreme as BSL-4, which is reserved for the most dangerous agents requiring full-body suits and separate facilities. So the suite is configured for BSL-3 containment.

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://29hrjko.examzify.com>

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

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