

# ATP SPECIAL OPERATIONS COMBAT MEDIC (SOCM) PRACTICE TEST (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.

# 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 type of louse is specifically found in the pelvic or pubic region?**
  - A. Head lice
  - B. Body lice
  - C. Pubic lice
  - D. Dog lice
- 2. In which scenario is a tear drop pupil most commonly observed?**
  - A. Upon recovery from prior surgery
  - B. After exposure to bright light
  - C. Following blunt force trauma to the eye
  - D. During allergic reaction
- 3. In cases of electrical burns, what is the recommended triage approach?**
  - A. Reverse triage, with the patient being the number one priority
  - B. Immediate CPR followed by transport to ICU
  - C. Assess for airway obstruction before anything else
  - D. Standard triage in the order of severity
- 4. What position is typically seen in patients with a posterior hip dislocation?**
  - A. Extreme abduction and rotation
  - B. Neutral position
  - C. Slight flexion, adduction, and internal rotation
  - D. Slight abduction and external rotation
- 5. What is the initial goal of CPR?**
  - A. Restore circulation and breathing
  - B. Determine the cause of arrest
  - C. Administer medication
  - D. Transport to a medical facility
- 6. What is a consequence of untreated or under-treated hypothyroidism?**
  - A. Thyroid storm
  - B. Cystitis
  - C. Goiter
  - D. Hyperthyroidism

- 7. What type of intravenous access is preferred in combat situations?**
- A. Peripheral IV access for fluid administration
  - B. Intraosseous (IO) access for rapid fluid administration
  - C. Central venous catheterization
  - D. Subcutaneous administration
- 8. Which condition is characterized by a localized peritoneal abscess that develops 24 hours after an initial event?**
- A. Peritonitis
  - B. Localized sepsis
  - C. Delayed infection
  - D. Generalized sepsis
- 9. If a patient shows signs of distress and inability to speak, what could be a likely issue?**
- A. Heart attack
  - B. Airway obstruction
  - C. Stroke
  - D. Pneumonia
- 10. If an abrasion is discovered in a patient's eye, what should you avoid giving as treatment?**
- A. Topical antibiotics
  - B. Corticosteroids
  - C. Antihistamines
  - D. Analgesics

## **Answers**

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

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## **Explanations**

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### 1. Which type of louse is specifically found in the pelvic or pubic region?

- A. Head lice
- B. Body lice
- C. Pubic lice**
- D. Dog lice

*Pubic lice, also known as "crabs," are specifically adapted to live in the coarse hair of the pelvic or pubic region. They are small, parasitic insects that tend to spread through close physical contact, often during sexual activity. Unlike head lice, which inhabit the scalp, and body lice, which prefer the seams of clothing and primarily feed on human blood, pubic lice are specifically associated with the pubic area and can also occasionally be found in armpit hair or other coarse body hair. This specificity in habitat is what categorizes them distinctly from other types of lice. Dog lice, on the other hand, affect canines and are not a concern for human infestations. Understanding the unique characteristics of pubic lice is crucial for effective diagnosis and treatment in cases of infestation.*

### 2. In which scenario is a tear drop pupil most commonly observed?

- A. Upon recovery from prior surgery
- B. After exposure to bright light
- C. Following blunt force trauma to the eye**
- D. During allergic reaction

*A tear drop pupil, characterized by a pupil that is misshapen, typically appears as a result of blunt force trauma to the eye. This deformation occurs due to damage to the muscles or nerves controlling the pupil's shape or due to a rupture or injury to the eye itself. In this scenario, the trauma can cause the iris to be pulled or torn, leading to the characteristic tear drop shape of the pupil. In the context of surgery, a typical recovery process does not result in the occurrence of a tear drop pupil; post-operative patients usually present with round pupils. When exposed to bright light, pupils constrict, typically becoming smaller and round rather than forming a tear drop shape. In allergic reactions, pupils may become dilated or remain normal in shape; however, a tear drop pupil is not a recognized response to allergies.*

### 3. In cases of electrical burns, what is the recommended triage approach?

- A. Reverse triage, with the patient being the number one priority**
- B. Immediate CPR followed by transport to ICU
- C. Assess for airway obstruction before anything else
- D. Standard triage in the order of severity

*In cases of electrical burns, the recommended triage approach emphasizes the need to prioritize patients based on the severity of their injuries and the potential complications that can arise from electrical injuries. The concept of reverse triage suggests that, in certain contexts—especially in mass casualty settings—those severely affected should be treated first to optimize survival and outcomes. In the context of electrical burns, this approach may lead to prioritizing patients who exhibit signs of critical injuries, such as arrhythmias or severe tissue damage, over those with less critical conditions. This method is particularly important because electrical injuries can have systemic effects that may not be immediately apparent, such as cardiac dysrhythmias and internal injuries, necessitating urgent intervention. The overarching principle is to ensure that those most in jeopardy receive timely care, which aligns with the tenets of effective triage in emergency medicine. Utilizing standard triage practices may overlook the nuances presented by electrical burns and could lead to delays for those who need immediate attention. It is crucial to evaluate each patient holistically while being cognizant of the potential for hidden injuries that are characteristic of electrical trauma.*

#### 4. What position is typically seen in patients with a posterior hip dislocation?

- A. Extreme abduction and rotation
- B. Neutral position
- C. Slight flexion, adduction, and internal rotation**
- D. Slight abduction and external rotation

*In cases of posterior hip dislocation, patients typically assume a position that reflects the injury's mechanism and anatomical disruptions. The affected leg is often observed in slight flexion, adduction, and internal rotation. This position occurs because the dislocation tends to pull the femur out of the acetabulum, leading to the characteristic alignment. The flexion results from muscle spasms and the position of the hip in relation to the pelvis during the dislocation. Adduction occurs as the femoral head moves out of its normal alignment, while internal rotation is a result of the muscular and capsular attachments that are disrupted during the dislocation process. This position can provide both a clinical clue for diagnosis and has implications for how to manage the dislocation adequately. Understanding this characteristic position aids medical personnel in quickly identifying the nature of the injury and deciding on appropriate interventions.*

#### 5. What is the initial goal of CPR?

- A. Restore circulation and breathing**
- B. Determine the cause of arrest
- C. Administer medication
- D. Transport to a medical facility

*The initial goal of CPR, or cardiopulmonary resuscitation, is to restore circulation and breathing in an individual who has experienced cardiac arrest. When the heart stops beating effectively, blood flow to vital organs ceases, which can lead to irreversible damage and death if not addressed promptly. CPR involves chest compressions and rescue breaths to mimic the function of the heart and lungs, maintaining blood flow and oxygenation until advanced medical help arrives. This immediate action is crucial to increase the chances of survival and recovery. While determining the cause of arrest, administering medication, and transporting to a medical facility are important parts of patient care in a broader scope, they are secondary to the immediate and urgent need to restore circulation and breathing, which is essential to sustaining life.*

#### 6. What is a consequence of untreated or under-treated hypothyroidism?

- A. Thyroid storm**
- B. Cystitis
- C. Goiter
- D. Hyperthyroidism

*The consequence of untreated or under-treated hypothyroidism can lead to the development of a goiter. A goiter is an enlargement of the thyroid gland that occurs as a compensatory mechanism when the thyroid is producing insufficient hormones. When the body senses low levels of thyroid hormones, it attempts to stimulate the thyroid gland to produce more by increasing the production of Thyroid Stimulating Hormone (TSH). The chronic stimulation by TSH can cause the gland to enlarge, resulting in a goiter. Thyroid storm is not a result of untreated hypothyroidism; rather, it is a life-threatening condition often associated with hyperthyroidism. Cystitis, which is inflammation of the bladder, is unrelated to thyroid function, and hyperthyroidism is characterized by excessive hormone production, not a deficiency as seen in hypothyroidism. Therefore, among the given options, goiter is the most relevant consequence of untreated or under-treated hypothyroidism.*

## 7. What type of intravenous access is preferred in combat situations?

- A. Peripheral IV access for fluid administration
- B. Intraosseous (IO) access for rapid fluid administration**
- C. Central venous catheterization
- D. Subcutaneous administration

*In combat situations, intraosseous (IO) access is preferred for rapid fluid administration because it provides a fast and effective means of delivering medications and fluids directly into the bloodstream when traditional intravenous (IV) access is challenging or time-consuming. This is particularly critical in emergency and combat scenarios where immediate intervention can be life-saving. The intraosseous route bypasses many of the complications that can arise with peripheral IV access, such as failed attempts, vein collapse, or limited access due to battlefield conditions. The IO access is also anatomically more stable, allowing for quicker and more reliable entry to the vascular system, which is vital when dealing with trauma patients who may be in shock and require immediate resuscitation. This method is especially beneficial when a patient is in a critical state where time is of the essence. Practitioners can use large-bore IO needles to gain access rapidly, making it the preferred choice in high-pressure situations faced by combat medics.*

## 8. Which condition is characterized by a localized peritoneal abscess that develops 24 hours after an initial event?

- A. Peritonitis
- B. Localized sepsis
- C. Delayed infection**
- D. Generalized sepsis

*The condition characterized by a localized peritoneal abscess that develops 24 hours after an initial event is best represented by delayed infection. In this context, a delayed infection typically occurs following an initial trauma or surgical procedure where bacteria or pathogens enter the abdominal cavity, causing localized inflammation and pus formation. This timing is significant, as the 24-hour period allows for the body's immune response to progress, resulting in the formation of an abscess which is a sac of pus that encapsulates the infection. Localized sepsis could involve multiple areas where an infection is present in a more distributed fashion, while generalized sepsis refers to a systemic response, involving the entire body. Peritonitis, on the other hand, would likely present with more immediate and widespread symptoms rather than a localized abscess developing after such a time frame. Therefore, the delayed nature of the infection's manifestation aligns with the formation of a localized abscess, making this the correct answer.*

**9. If a patient shows signs of distress and inability to speak, what could be a likely issue?**

- A. Heart attack
- B. Airway obstruction**
- C. Stroke
- D. Pneumonia

*When a patient displays signs of distress and an inability to speak, a likely issue is an airway obstruction. This condition can manifest as choking, where the patient may struggle to breathe and communicate effectively. The inability to speak is often associated with a compromised airway, which can occur due to various reasons such as foreign object obstruction, swelling, or severe reaction. In emergency situations, airway obstruction is particularly critical since it can quickly lead to respiratory failure and can be life-threatening if not addressed promptly. While other options, such as a heart attack, stroke, or pneumonia, can also cause distress, they typically present with additional specific symptoms or signs that differ from the immediate, acute signs of airway obstruction. For example, a stroke might lead to weakness on one side of the body or facial drooping, while a heart attack may present with chest pain or discomfort. Pneumonia is associated with respiratory symptoms and fever but would generally not present with acute inability to speak in the same way that an airway blockage does. Hence, in a situation where a patient is distressed and cannot speak, swift recognition and action regarding the possibility of an airway obstruction is crucial for effective treatment.*

**10. If an abrasion is discovered in a patient's eye, what should you avoid giving as treatment?**

- A. Topical antibiotics**
- B. Corticosteroids
- C. Antihistamines
- D. Analgesics

*In the case of an abrasion in the eye, administering corticosteroids is typically avoided due to their potential to impede the healing process. Corticosteroids can suppress the local immune response, which is crucial for healing and can lead to complications such as increased intraocular pressure or secondary infections. Moreover, these medications may exacerbate any underlying conditions or complicate the patient's clinical picture following an eye injury. Topical antibiotics may be necessary to prevent infection, especially when there's a risk of contamination from the environment or if the abrasion is extensive. Antihistamines are generally used to alleviate allergic reactions and are not directly related to the treatment of abrasions. Analgesics, while important for pain management, do not hinder the healing process and can be safely utilized to keep the patient comfortable. Understanding these distinctions is essential in providing appropriate care for eye injuries and ensuring optimal healing outcomes.*

## 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](mailto:hello@examzify.com).

Or visit your dedicated course page for more study tools and resources:

<https://atpsocm.examzify.com>

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

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