

BASIC INFANTRY KNOWLEDGE 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. What are the three phases of Combat Lifesaver (CLS) training?**
 - A. Assessment, Treatment, Evacuation
 - B. Care under fire, Tactical field care, Tactical evacuation care
 - C. Initial care, Follow-up care, Long-term care
 - D. Basic life support, Advanced life support, Evacuation
- 2. What is the minimum safe firing distance for the M203 during combat?**
 - A. 10 meters
 - B. 31 meters
 - C. 50 meters
 - D. 100 meters
- 3. What is the effective point range of the M27 weapon?**
 - A. 700m
 - B. 550m
 - C. 3600m
 - D. 400m
- 4. During enemy preparatory bombardment, what is the recommended action for soldiers?**
 - A. Advance toward the enemy
 - B. Maintain surveillance while taking cover
 - C. Call for air support
 - D. Establish a defensive line
- 5. What does the acronym TRDS help to identify in medical assessments?**
 - A. Temperature, Rigidity, Distention, Swelling
 - B. Tenderness, Rigidity, Distention, Swelling
 - C. Tenderness, Responsiveness, Distance, Stability
 - D. Tension, Rigor, Dryness, Sensitivity
- 6. In a mobile defense, what is a key element that defenders often utilize?**
 - A. Static firepoints
 - B. Defensive mines
 - C. Terrain to channel enemy attacks
 - D. Heavy artillery support

7. What is the primary purpose of offensive combat?

- A. To hold ground
- B. To destroy the enemy and their will to fight
- C. To provide defensive support
- D. To gather intelligence

8. What is the typical BPM for a radial pulse?

- A. 50 BPM
- B. 60 BPM
- C. 70 BPM
- D. 80 BPM

9. In what order should patients be loaded into evacuation platforms?

- A. Routine, priority, urgent, expectant
- B. Urgent, expectant, routine, priority
- C. Expectant, routine, priority, urgent
- D. Priority, urgent, expectant, routine

10. What are two signs of internal bleeding?

- A. Severe headache and dizziness
- B. TRDS - bleeding from the anus
- C. Nausea and vomiting
- D. Fainting and confusion

Answers

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

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Explanations

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1. What are the three phases of Combat Lifesaver (CLS) training?

- A. Assessment, Treatment, Evacuation
- B. Care under fire, Tactical field care, Tactical evacuation care**
- C. Initial care, Follow-up care, Long-term care
- D. Basic life support, Advanced life support, Evacuation

The three phases of Combat Lifesaver (CLS) training are Care Under Fire, Tactical Field Care, and Tactical Evacuation Care. This framework is specifically designed to provide soldiers with the skills necessary to deliver essential medical care in combat situations. Care Under Fire is the first phase, where immediate life-saving measures are taken while under enemy fire, emphasizing the importance of personal safety for both the casualty and the rescuer. This phase focuses on controlling massive hemorrhaging and other critical interventions that can be performed while still in a dangerous environment. The second phase, Tactical Field Care, occurs when the scene is secure, allowing for more thorough medical assessments and interventions. During this phase, CLS-trained personnel perform treatments such as airway management, wound care, and the management of shock, employing a range of skills that could drastically increase a soldier's chance of survival until higher-level medical personnel can take over. The final phase, Tactical Evacuation Care, involves preparing and conducting the evacuation of casualties to a higher level of medical support. This includes continuous monitoring and treatment during the evacuation process, ensuring that the patient remains stable and receives appropriate interventions throughout their transport to definitive care. Understanding these phases is crucial for anyone involved in combat situations, as they ensure that lifes

2. What is the minimum safe firing distance for the M203 during combat?

- A. 10 meters
- B. 31 meters**
- C. 50 meters
- D. 100 meters

The minimum safe firing distance for the M203 grenade launcher during combat is indeed 31 meters. This distance is established to ensure the safety of personnel from potential fragmentation and blast effects that can occur when the grenade is fired. Firing at a distance less than 31 meters increases the risk of injury to both the shooter and nearby troops due to the possibility of the explosive round detonating too close to friendly forces. This specific distance has been determined through extensive testing and operational experience, ensuring that the risk is mitigated while still allowing the weapon to be effective in the intended combat scenarios. Other distances listed, such as 10 meters, 50 meters, or 100 meters, either do not accurately reflect safe operational practices or do not align with established military standards for employing the M203 in a combat environment.

3. What is the effective point range of the M27 weapon?

- A. 700m
- B. 550m**
- C. 3600m
- D. 400m

The effective point range of the M27 weapon system is indeed around 550 meters. This range indicates the distance at which a trained marksman can accurately engage a stationary target with a high probability of hitting it. The designation of 550 meters reflects the weapon's design and capabilities, focusing on its purpose in close-quarters and urban combat scenarios, where effective engagements typically occur within this distance. In contrast, options such as 700 meters or 3600 meters exceed the effective range for direct engagements with this weapon. 400 meters falls below the standard range, again reflecting the weapon's operational effectiveness that is recognized within military training and documentation. Understanding the effective point range is crucial for soldiers to engage targets accurately, maintain situational awareness, and make strategic decisions in combat environments.

4. During enemy preparatory bombardment, what is the recommended action for soldiers?

- A. Advance toward the enemy
- B. Maintain surveillance while taking cover**
- C. Call for air support
- D. Establish a defensive line

Maintaining surveillance while taking cover during an enemy preparatory bombardment is essential for several reasons. This approach allows soldiers to stay informed about the enemy's movements and tactics while minimizing exposure to danger. Staying under cover helps protect against shrapnel and direct fire, which are significant threats during bombardments. By observing the enemy's actions, soldiers can gather critical intelligence on the timing and intensity of assaults, enabling informed decision-making about subsequent actions. In contrast, advancing toward the enemy during bombardment would increase the risk of casualties due to the ongoing fire. Calling for air support might not be effective or timely, as conditions during a bombardment may limit the availability of air assets or the safety of those on the ground. Establishing a defensive line can be crucial in preparation for an assault, but during bombardment, the focus should be on maintaining safety and gathering information rather than setting static defensive positions that could become compromised.

5. What does the acronym TRDS help to identify in medical assessments?

- A. Temperature, Rigidity, Distention, Swelling
- B. Tenderness, Rigidity, Distention, Swelling**
- C. Tenderness, Responsiveness, Distance, Stability
- D. Tension, Rigor, Dryness, Sensitivity

The acronym TRDS stands for Tenderness, Rigidity, Distention, and Swelling, which are key parameters in medical assessments, especially in evaluating patients with abdominal pain or potential injuries. Tenderness indicates whether the patient experiences pain when pressure is applied to the abdomen, which can provide insight into underlying issues such as inflammation or injury. Rigidity assesses the stiffness of the abdominal muscles, which can signal conditions such as peritonitis or other serious abdominal problems. Distention refers to the abnormal enlargement or swelling of the abdomen, often indicative of gas, fluid buildup, or internal bleeding. Swelling can indicate inflammation or a buildup of fluid, which may necessitate further investigation and intervention. Recognizing these components is crucial for medical personnel, as they guide decision-making regarding diagnosis and treatment. In contrast, the other options do not accurately reflect the terminology used in medical assessments, and therefore would not provide the same clarity and relevance in identifying significant clinical findings.

6. In a mobile defense, what is a key element that defenders often utilize?

- A. Static firepoints
- B. Defensive mines
- C. Terrain to channel enemy attacks**
- D. Heavy artillery support

In a mobile defense, a crucial element that defenders utilize is terrain to channel enemy attacks. This approach involves using the natural features of the landscape to create advantageous positions and pathways that can influence the enemy's movements. By strategically placing defensive units in specific locations that leverage the terrain, defenders can compel the enemy to attack through predetermined routes or areas where they are most vulnerable. This tactic allows defenders to maximize the effectiveness of their forces by concentrating firepower and resources on key points, enhancing both offensive and defensive capabilities. The use of terrain in this way not only helps in controlling the battlefield but also increases the likelihood of successfully repulsing enemy assaults. In contrast, while static firepoints, defensive mines, and heavy artillery support are important components of traditional defensive strategies, they do not characterize the dynamic and flexible nature of a mobile defense in the same way that utilizing terrain does.

7. What is the primary purpose of offensive combat?

- A. To hold ground
- B. To destroy the enemy and their will to fight**
- C. To provide defensive support
- D. To gather intelligence

The primary purpose of offensive combat is to destroy the enemy and their will to fight. In an offensive operation, the attacking force aims to engage the enemy in a way that depletes their resources, manpower, and morale. By inflicting significant losses and disrupting their ability to organize and respond, the offensive seeks not just to gain territory but to achieve a decisive impact on the enemy's capability to continue the conflict. This approach is essential in military strategy, as it directly addresses the overall goal of achieving victory by incapacitating the opposing force. By forcing the enemy into a position of retreat or surrender, the offensive operation serves to shift the momentum of the conflict in favor of the attacking side. Other goals like holding ground or providing defensive support, while important in their own right, do not capture the essence of what an offensive operation aims to accomplish, which is rooted in aggressive engagement and the destruction of the enemy's will to resist. Gathering intelligence is also a critical aspect of military operations, but it is typically a supporting function that supplements offensive actions rather than the primary purpose itself.

8. What is the typical BPM for a radial pulse?

- A. 50 BPM
- B. 60 BPM
- C. 70 BPM
- D. 80 BPM**

The average beats per minute (BPM) for a resting adult typically falls within the range of 60 to 100 BPM, with 70 to 80 BPM being a common reference point for a normal radial pulse. The radial pulse, felt at the wrist, is an indicator of heart rate and varies from person to person based on factors such as fitness level, age, and general health. A BPM of 80 falls within this normal range and is often considered to be on the higher end of typical resting heart rates for a healthy adult. It is important to note that while individual resting heart rates can vary, maintaining a pulse rate within this range is generally considered a sign of good cardiovascular function. A BPM lower than 60, like 50 BPM, may indicate bradycardia, which can be normal for well-trained athletes but may warrant further investigation in others. A BPM of 60 is at the lower end of normal, while 70 BPM is a comfortable midpoint often cited in health guidelines. A measurement of 80 BPM thus represents a pulse that is indeed typical and indicative of normal functioning without suggesting distress or health issues.

9. In what order should patients be loaded into evacuation platforms?

- A. Routine, priority, urgent, expectant
- B. Urgent, expectant, routine, priority
- C. Expectant, routine, priority, urgent**
- D. Priority, urgent, expectant, routine

The correct order for loading patients into evacuation platforms adheres to established triage protocols designed to maximize survival rates. This method prioritizes patients based on the immediacy of their medical needs. Loading patients as "expectant," followed by "routine," then "priority," and finally "urgent" aligns with the understanding that patients labeled as expectant are those who have a very low chance of survival, regardless of the care provided, and thus may not be taken for evacuation. The routine patients are those with less severe injuries that do not require immediate attention, while priority patients are more critical but can wait a moment longer. Urgent patients typically require immediate care but may be stable enough to wait briefly for extraction. This triage approach emphasizes moving patients who are less likely to survive out of the way first, allowing for a more efficient evacuation of those who have the highest chance of survival. Other orderings presented fail to maintain this critical focus on maximizing life-saving potential by not giving appropriate priority to the various levels of urgent medical needs, potentially leading to a decrease in overall survival rates for those who can be saved.

10. What are two signs of internal bleeding?

- A. Severe headache and dizziness
- B. TRDS - bleeding from the anus**
- C. Nausea and vomiting
- D. Fainting and confusion

Internal bleeding can manifest in various ways, depending on the severity and location of the bleeding. In this context, one of the signs of internal bleeding is the presence of TRDS, which includes bleeding from the anus. This particular indication can signify bleeding in the gastrointestinal tract, which is often serious and warrants immediate medical attention. Other signs of internal bleeding may not directly refer to visible bleeding but can show systemic effects due to blood loss. Severe headache and dizziness, for instance, relate more to abrupt drops in blood pressure, which might not necessarily indicate internal bleeding. Nausea and vomiting can be symptoms of various conditions, not specifically internal bleeding. Fainting and confusion may also arise from several medical issues, including shock or decreased blood flow to the brain, and aren't exclusive to internal bleeding. Overall, signs of internal bleeding can be subtle and varied, but the presence of TRDS, especially bleeding from the anus, specifically points to potential internal bleeding, making it a clear indicator of this serious condition.

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://basicinfantryknowledge.examzify.com>

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

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