

COMBAT LIFE SAVER PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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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. How does the combat gauze bandage promote hemostasis?**
 - A. By applying direct pressure on the wound
 - B. Through a chemical reaction that promotes blood clotting
 - C. By soaking up excess blood
 - D. By cooling the area around the wound
- 2. What three indicators suggest that a nasopharyngeal airway should be inserted into a breathing casualty?**
 - A. 1) Respiration rate is less than 2 breaths every 15 seconds; 2) Making snoring or gurgling sounds; 3) Unconscious
 - B. 1) Casualty is alert; 2) Breathing evenly; 3) No neck injury
 - C. 1) Agitated breathing; 2) Excessive coughing; 3) High pulse rate
 - D. 1) Chest trauma; 2) Low blood pressure; 3) Heavily bruised face
- 3. When should the term "ROGER WILCO" be used in making a MEDEVAC request?**
 - A. Always
 - B. Often
 - C. Sometimes
 - D. Never
- 4. What is essential before moving a casualty to a safer location in a tactical field care scenario?**
 - A. Confirming the casualty is conscious
 - B. Stabilizing any life-threatening conditions
 - C. Gathering all supplies
 - D. Notifying command of your actions
- 5. If you have been wounded and are under enemy fire, what is the best course of action?**
 - A. Attempt to crawl to cover
 - B. Shout for help
 - C. Play dead
 - D. Return fire whenever possible

- 6. Once the pleural space is penetrated with the needle, what is the next step?**
- A. Remove the catheter immediately
 - B. Advance the needle/catheter all the way to the hub, then remove it while leaving the catheter in place
 - C. Inject fluid into the pleural space
 - D. Call for advanced medical help
- 7. What is the immediate action you should take for serious bleeding?**
- A. Apply a bandage
 - B. Apply pressure to the wound
 - C. Elevate the limb
 - D. Give oxygen
- 8. What is a proper method of marking a casualty after applying an improvised tourniquet?**
- A. Write a "T" and the time of application on the casualty's skin
 - B. Draw a circle around the wound
 - C. Write the casualty's name on his forehead
 - D. Mark with a pen on the clothing
- 9. What is the format used to request evacuation in a combat setting?**
- A. MEDEVAC request
 - B. CASUALTY request
 - C. EMERGENCY response
 - D. TRANSPORT request
- 10. If a casualty is bleeding from a leg wound and trouser material is stuck to it, what should you do?**
- A. Pull the material off gently
 - B. Cut around the stuck material
 - C. Leave it alone until help arrives
 - D. Apply more bandages over it

Answers

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

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Explanations

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1. How does the combat gauze bandage promote hemostasis?

- A. By applying direct pressure on the wound
- B. Through a chemical reaction that promotes blood clotting**
- C. By soaking up excess blood
- D. By cooling the area around the wound

The combat gauze bandage is designed specifically for managing traumatic bleeding and promoting hemostasis, primarily through a chemical reaction that enhances blood clotting. The gauze is often impregnated with a hemostatic agent, typically a substance that accelerates the body's natural clotting processes. When the gauze is applied to a wound, it not only serves to fill the wound space but also releases these hemostatic agents, which interact with the blood and promote the formation of a stable clot more effectively than without the gauze. This chemical interaction creates an environment conducive to coagulation and assists in effectively stopping heavy bleeding. It is an essential tool in combat medicine because rapid and effective hemostasis can be critical in saving lives. While applying direct pressure is also an important method to control bleeding, in the context of combat gauze, the enhanced clotting capabilities provided by its chemical properties make it a unique and vital component in trauma care.

2. What three indicators suggest that a nasopharyngeal airway should be inserted into a breathing casualty?

- A. 1) Respiration rate is less than 2 breaths every 15 seconds; 2) Making snoring or gurgling sounds; 3) Unconscious**
- B. 1) Casualty is alert; 2) Breathing evenly; 3) No neck injury
- C. 1) Agitated breathing; 2) Excessive coughing; 3) High pulse rate
- D. 1) Chest trauma; 2) Low blood pressure; 3) Heavily bruised face

The indicators that suggest a nasopharyngeal airway should be inserted into a breathing casualty focus on the airway's patency and the presence of obstructive signs. When a casualty is making snoring or gurgling sounds, it indicates that there is an obstruction in the airway, often caused by the tongue or secretions, which can lead to inadequate ventilation. Additionally, the casualty being unconscious means they do not have protective airway reflexes, increasing the risk of airway compromise. A respiration rate of less than 2 breaths every 15 seconds suggests that the casualty is struggling with adequate breathing, further underscoring the need for airway management. In contrast, the other options do not indicate a need for airway intervention. A casualty who is alert and breathing evenly is typically maintaining their airway effectively, while signs of agitation or excessive coughing might suggest respiratory distress but do not directly call for a nasopharyngeal airway insertion. Lastly, chest trauma, low blood pressure, or facial bruising, while indicative of serious injuries, do not specifically imply that the airway is compromised in a manner that necessitates the use of a nasopharyngeal airway. Thus, the correct scenario for inserting this airway involves the outlined unconscious state with obstructive breathing sounds

3. When should the term "ROGER WILCO" be used in making a MEDEVAC request?

- A. Always
- B. Often
- C. Sometimes
- D. Never**

The term "ROGER WILCO" should never be used in making a MEDEVAC request because it can lead to confusion in communication. MEDEVAC requests are critical and must be clear and unambiguous to ensure the safe and timely evacuation of injured personnel. The phrase "ROGER WILCO" combines acknowledgment ("ROGER") and a statement indicating understanding and intent to comply ("WILCO"). In a high-pressure situation such as a MEDEVAC, clarity is of utmost importance; therefore, it is better to simply confirm the acknowledgment of the request in straightforward terms without combining phrases that may dilute the message. Using concise and direct communication ensures that all parties involved maintain a clear understanding of the situation and can act quickly. In the context of emergency medical evacuations, miscommunication can have serious consequences, which reinforces the necessity of using precise language tailored to the emergency at hand.

4. What is essential before moving a casualty to a safer location in a tactical field care scenario?

- A. Confirming the casualty is conscious
- B. Stabilizing any life-threatening conditions**
- C. Gathering all supplies
- D. Notifying command of your actions

Before moving a casualty in a tactical field care scenario, it is vital to stabilize any life-threatening conditions. This is crucial because if a casualty has an uncontrolled hemorrhage, airway obstruction, or any critical injury that requires immediate medical intervention, moving them without first addressing these conditions could worsen their situation. Stabilizing these life-threatening issues helps to ensure that the casualty remains stable during transport, reducing the risk of further harm or deterioration in their condition. In the context of tactical field care, the priority is focused on providing the best chance of survival and minimizing complications. Therefore, addressing life-threatening conditions is a critical first step before considering any other actions, such as moving the casualty or notifying command. While confirming consciousness, gathering supplies, and notifying command are all also important steps in the overall care process, they are secondary to directly addressing any life-threatening injuries that could escalate if the casualty is moved prematurely.

5. If you have been wounded and are under enemy fire, what is the best course of action?

- A. Attempt to crawl to cover
- B. Shout for help
- C. Play dead**
- D. Return fire whenever possible

Playing dead, in theory, may seem like a tactical move to avoid detection by the enemy. However, the best course of action in a scenario where one has been wounded and is under enemy fire depends on several critical factors, such as the severity of the injury, proximity to cover, and the ability to safely disengage from the situation. Choosing to play dead assumes that the enemy will not check for signs of life, which is often not the case in real combat situations. This strategy carries a high risk of fatal consequences since remaining still in an exposed area may leave you vulnerable to further injury. In contrast, attempting to crawl to cover allows for a potential escape from the line of fire, which is crucial for increasing your chances of survival and receiving medical attention. Calling for help can alert teammates to your location and injury but may not be as reliable when considering the immediacy of danger. Returning fire is essential for self-defense and can help provide cover but should be assessed based on the situation's overall tactical evaluation. Therefore, understanding the gravity of the situation and weighing the potential outcomes is critical when dealing with enemy fire. Making strategic decisions grounded in situational awareness is vital to increase survival chances in combat scenarios.

6. Once the pleural space is penetrated with the needle, what is the next step?

- A. Remove the catheter immediately
- B. Advance the needle/catheter all the way to the hub, then remove it while leaving the catheter in place**
- C. Inject fluid into the pleural space
- D. Call for advanced medical help

When the pleural space has been penetrated with the needle, the next step is to advance the needle or catheter all the way to the hub and then remove the needle while leaving the catheter in place. This technique allows for immediate access to the pleural space for various therapeutic interventions, such as draining fluid or air (in cases of pneumothorax) while minimizing the risk of collapse or re-occlusion of the space. Advancing the catheter to the hub ensures that the catheter is fully seated within the pleural space, creating a pathway for continued drainage or medication administration. Removing the needle while keeping the catheter in place is crucial as the needle describes the pathway into the pleural space, which is necessary for maintaining that access. This method is effective because it allows for a controlled procedure and ensures that no additional air is introduced into the pleural space once the needle is withdrawn. Careful technique at this stage is essential to avoid complications that could arise from improper management, such as re-accumulation of fluid or air or injury to surrounding tissues.

7. What is the immediate action you should take for serious bleeding?

- A. Apply a bandage
- B. Apply pressure to the wound**
- C. Elevate the limb
- D. Give oxygen

Applying pressure to the wound is the most critical immediate action to take for serious bleeding. When faced with a bleeding injury, the application of direct pressure helps to control blood loss and can be life-saving. This action works by promoting clot formation at the site of the injury, which is essential in minimizing blood loss and stabilizing the individual until further medical treatment is available. While other actions like applying a bandage, elevating the limb, or administering oxygen may be necessary depending on the situation, they are secondary to the urgent need to control the bleeding. Applying a bandage, for instance, is important but typically follows the initial step of applying pressure directly to the wound. Elevation can also help reduce bleeding in certain scenarios but is only effective once direct pressure is underway. Giving oxygen is primarily relevant for patients who are in shock or have difficulty breathing, rather than being an immediate response to serious bleeding itself. Thus, the priority must be placed on applying pressure to effectively manage the threat of severe hemorrhage.

8. What is a proper method of marking a casualty after applying an improvised tourniquet?

- A. Write a "T" and the time of application on the casualty's skin**
- B. Draw a circle around the wound
- C. Write the casualty's name on his forehead
- D. Mark with a pen on the clothing

Marking a casualty with a "T" and the time of application on the skin is a crucial step after applying an improvised tourniquet. This practice serves several important purposes in a combat or emergency medical situation. First, marking the skin with a "T" clearly indicates that a tourniquet has been applied and provides vital information to other medical responders who may encounter the casualty later. This can prevent unnecessary further application of a tourniquet, which could cause additional injury or complications if done repeatedly or incorrectly. Second, including the time of application is essential for medical personnel to assess the duration that the tourniquet has been in place. Tourniquets can cause tissue damage if left on for extended periods, so knowing the exact time helps responders make informed decisions about future treatment options. While other options may offer some form of identification or marking, they lack the clarity and critical information that is necessary for ensuring the best possible care for the casualty. Therefore, marking the skin with the "T" and time of application is not only a best practice but also aligns with protocols that prioritize the wellbeing of the injured person.

9. What is the format used to request evacuation in a combat setting?

- A. MEDEVAC request**
- B. CASUALTY request
- C. EMERGENCY response
- D. TRANSPORT request

The correct choice is the MEDEVAC request, which stands for "Medical Evacuation." This format is specifically designed to communicate the need for the urgent transportation of casualties from the battlefield to a medical facility. The MEDEVAC request includes critical information such as the location of the casualty, the type of injuries sustained, the number of casualties, and any specific requirements needed for evacuation. This format is essential in a combat setting because timely and efficient medical evacuation can significantly increase the chances of survival for injured personnel. The MEDEVAC system ensures that as much relevant information as possible is conveyed to the medical evacuation units, facilitating a swift response and appropriate medical care. In contrast, other options may not specifically address the medical evacuation process or could be used in different contexts. For instance, a "CASUALTY request" may not provide sufficient detail regarding the medical needs, while "EMERGENCY response" and "TRANSPORT request" lack the specific focus and structure that a MEDEVAC request entails. Therefore, understanding and utilizing the MEDEVAC request format is crucial for effective combat medical support.

10. If a casualty is bleeding from a leg wound and trouser material is stuck to it, what should you do?

- A. Pull the material off gently
- B. Cut around the stuck material**
- C. Leave it alone until help arrives
- D. Apply more bandages over it

When a casualty has a leg wound with trouser material stuck to it, the best course of action is to cut around the stuck material. This approach is crucial because pulling the material off can cause further damage and exacerbate the bleeding by disrupting any clotting that may have begun to occur. In situations where clothing is adhered to a wound, cutting away the material allows for proper assessment of the injury without disturbing it too much. It also enables the application of appropriate wound care, such as direct pressure or a bandage designed to control bleeding. Leaving the material alone until help arrives might prevent immediate treatment and could lead to complications, such as infection or increased blood loss. Applying more bandages over the stuck material, while it may seem like a way to control bleeding, does not address the underlying issue of the trapped fabric which could interfere with proper wound management. Therefore, cutting around the stuck material provides a balance between managing the injury and facilitating effective healing.

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://combatlifesaver.examzify.com>

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

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