Elsevier Community Health I & II 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

1. What is the primary purpose of public health surveillance?

A. Monitor health events and detect trends

B. Treat diseases in individuals

C. Provide clinical care

D. Allocate resources

2. Which triage method is commonly used in mass casualty incidents to quickly categorize patients based on likelihood of survival and need for treatment?

A. SALT (Sort, Assess, Lifesaving Interventions, Treatment).

B. Triage by arrival time.

C. START (Simple Triage and Rapid Treatment).

D. MASS (Massive Accident Severity Scoring System).

3. Which set lists the primary steps in a community environmental health risk assessment?

A. Hazard identification; dose-response assessment; exposure assessment; risk characterization

B. Risk management; policy development; outreach; enforcement

C. Data collection only

D. Surveillance and health communication

4. What is herd immunity, and what vaccination coverage threshold is typically needed for measles to prevent sustained transmission?

A. Herd immunity means everyone must be vaccinated; threshold 60%

B. Herd immunity means only unvaccinated are protected; threshold 70%

C. Herd immunity occurs when a sufficient proportion is immune, reducing transmission; measles threshold 90-95%

D. Herd immunity requires 100% vaccination; threshold 100%

5. What is a needs assessment in community health, and what are two common data collection methods?

A. A random process to identify ch its; ad hoc data collection

B. A budget-focused exercise with cost analysis

C. A systematic process to identify health needs and gaps; methods include surveys and focus groups

D. An annual service utilization report using invoices

6. Which statement correctly defines endemic, epidemic, and pandemic with appropriate examples?

A. Endemic only in animals

B. Endemic constant presence; epidemic higher than expected; pandemic widespread across countries

C. Epidemic constant presence

D. Pandemic is localized outbreak

7. The Pandemic and All-Hazards Preparedness Reauthorization Act is associated with establishing programs to improve response to pandemics. Which of the following is a related program?

A. BioWatch

B. Red Cross Volunteer Program

C. National Park Service

D. Federal Motor Carrier Safety Administration

8. Which set lists the stages of the Transtheoretical Model (TTM)?

A. Unawareness, exploration, adoption, saturation

B. Precontemplation, contemplation, preparation, action, maintenance

C. Knowledge, awareness, acceptance, compliance

D. Initiation, growth, maturity, decline

9. Which statement correctly defines incidence and prevalence?

A. Incidence is the total number of existing cases at a given time; Prevalence is the rate of new cases over a period in a population at risk.

B. Incidence is the rate of new cases over a period in a population at risk; Prevalence is the total number of existing cases at a given time.

C. Both incidence and prevalence measure new cases over time.

D. Prevalence measures only severe cases while incidence measures all new cases.

10. Which practice is essential for safe perinatal immunizations and childhood vaccines?

A. Maintaining cold chain

B. Administering vaccines without verifications

C. Ignoring contraindications

D. Scheduling all vaccines in one visit

Answers

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

Explanations

1. What is the primary purpose of public health surveillance?

A. Monitor health events and detect trends

B. Treat diseases in individuals

C. Provide clinical care

D. Allocate resources

Public health surveillance is the ongoing process of collecting, analyzing, and interpreting health data to watch for patterns in health events over time. Its main job is to detect changes in disease frequency, identify outbreaks or emerging threats, and monitor trends so public health authorities can respond quickly and put prevention and control measures in place. For example, watching the rise and fall of influenza-like illness across communities helps spot unusual spikes and trigger investigations or vaccination efforts. While the data from surveillance can guide decisions about where to focus resources or clinical services, the central aim is monitoring and trend detection to inform action, not treating individuals or delivering clinical care.

2. Which triage method is commonly used in mass casualty incidents to quickly categorize patients based on likelihood of survival and need for treatment?

A. SALT (Sort, Assess, Lifesaving Interventions, Treatment).

B. Triage by arrival time.

C. START (Simple Triage and Rapid Treatment).

D. MASS (Massive Accident Severity Scoring System).

In mass casualty situations, the goal is to rapidly decide who can benefit from immediate life-saving care and who can wait. START is designed for quick field triage using a few simple physiological checks that reflect survival potential and need for treatment. The method starts by opening the airway and checking if the person is breathing; if they aren't breathing and don't resume after airway opening, they're categorized for non-urgent intervention or, in some schemes, considered not to benefit from immediate care. If they are breathing, you assess the rate: very fast breathing signals serious compromise and immediate attention is needed. If the rate is not excessive, you then evaluate perfusion by checking for a distal pulse or capillary refill; poor perfusion or absent distal pulses indicate immediate priority. If perfusion is adequate, you test mental status by asking the person to follow a simple command; inability to follow commands suggests they require immediate care. Those who can follow commands with good perfusion and normal breathing are categorized as delayed or minor. This approach yields quick, actionable triage decisions that prioritize those most likely to survive with prompt treatment. Other systems like SALT or MASS exist, and triage by arrival time isn't a standardized rapid-field method, but START remains the commonly taught and widely used approach for MCIs.

3. Which set lists the primary steps in a community environmental health risk assessment?

A. Hazard identification; dose-response assessment; exposure assessment; risk characterization

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C. Data collection only

D. Surveillance and health communication

Understanding environmental health risk assessment starts with identifying what could cause harm, then figuring out how dose relates to effect, then estimating who is exposed and to what extent, and finally combining all of this into a clear statement of risk with uncertainties. Hazard identification asks which agents or conditions have the potential to cause adverse health effects in exposed populations. Dose-response assessment looks at how the frequency or severity of those effects changes with different levels of exposure. Exposure assessment estimates how much of the agent people encounter, how often, and in what ways. Risk characterization brings together all these pieces to describe the overall risk, including the degree of uncertainty and the variation among individuals, so that decisions about protection and control can be made. Other options describe activities that come after assessment (risk management and policy actions) or aspects of monitoring and communication, rather than the formal four-step analysis used to quantify and describe risk.

4. What is herd immunity, and what vaccination coverage threshold is typically needed for measles to prevent sustained transmission?

A. Herd immunity means everyone must be vaccinated; threshold 60%

B. Herd immunity means only unvaccinated are protected; threshold 70%

C. Herd immunity occurs when a sufficient proportion is immune, reducing transmission; measles threshold 90-95%

D. Herd immunity requires 100% vaccination; threshold 100%

Herd immunity happens when enough people in a population are immune—through vaccination or prior infection—so disease transmission is unlikely to sustain itself. This protects those who aren't immune because the chains of transmission are broken. For measles, the needed level of immune individuals is very high, about 90-95%. Measles is extremely contagious (high R0), so only when most people are immune can outbreaks be prevented and transmission halted. Vaccination coverage around this range reduces the chances of sustained spread and protects the whole community, including those who can't be vaccinated or don't have full protection. The other statements misstate the idea or propose unrealistically low (or impossible) thresholds; herd immunity isn't that everyone must be vaccinated, nor that only the unvaccinated are protected, and it doesn't require 100% vaccination.

5. What is a needs assessment in community health, and what are two common data collection methods?

A. A random process to identify ch its; ad hoc data collection

B. A budget-focused exercise with cost analysis

C. A systematic process to identify health needs and gaps; methods include surveys and focus groups

D. An annual service utilization report using invoices

A needs assessment in community health is a systematic process to identify health needs and gaps in a community and to determine priorities for action. It guides where to allocate limited resources, shapes program planning, and helps set relevant, measurable goals. Two common data collection methods are surveys and focus groups. Surveys provide quantitative, broad-based data on health status, service access, and resident priorities, giving a sense of how widespread certain needs are. Focus groups, on the other hand, gather qualitative insights from participants to explore the reasons behind identified needs, barriers to care, and ideas for potential solutions. Using both approaches gives a fuller picture—surveys show how many people are affected, while focus groups illuminate why those issues exist and how best to address them. The other options describe activities that are not systematic needs assessments (random or ad hoc processes, budget analysis, or solely service utilization reports), so they don't capture the full planning purpose of a needs assessment.

6. Which statement correctly defines endemic, epidemic, and pandemic with appropriate examples?

A. Endemic only in animals

B. Endemic constant presence; epidemic higher than expected; pandemic widespread across countries

C. Epidemic constant presence

D. Pandemic is localized outbreak

These terms describe how often a disease occurs and how widely it spreads. Endemic means a disease is continuously present in a population or area at a baseline level. For example, malaria remains regularly established in certain regions, year after year, without a sudden surge above what's normally expected. Epidemic refers to a rise in cases that is higher than what's normally expected in a specific place or population over a period of time. It's an uptick, not a constant presence. Pandemic goes further, describing an outbreak that spreads across many countries or continents, affecting a large number of people, such as the global spread seen with COVID-19. So the statement that ties these together—endemic as constant presence, epidemic as a higher-than-expected increase, and pandemic as widespread across countries—best matches these definitions. Some descriptions that say epidemics are the same as a constant presence, or that pandemics are just localized outbreaks, don't fit how these patterns are defined or observed in public health.

7. The Pandemic and All-Hazards Preparedness Reauthorization Act is associated with establishing programs to improve response to pandemics. Which of the following is a related program?

A. BioWatch

B. Red Cross Volunteer Program

C. National Park Service

D. Federal Motor Carrier Safety Administration

The program being tested is about how federal efforts under PAHPA aim to strengthen response to biological threats through surveillance and early detection. BioWatch fits this role by providing environmental monitoring of the air in major cities to detect potential biological agents early. When a suspicious release is detected, public health authorities can quickly mobilize responders, inform hospitals, and accelerate actions like activating medical countermeasures. This kind of biosurveillance and rapid response capability is exactly what PAHPA seeks to establish and improve. The Red Cross Volunteer Program, while valuable for humanitarian response, is not a federal biosurveillance or pandemic-response program under PAHPA. The National Park Service and the Federal Motor Carrier Safety Administration have other primary missions and do not serve as the pandemic-related biosurveillance program PAHPA targets.

8. Which set lists the stages of the Transtheoretical Model (TTM)?

A. Unawareness, exploration, adoption, saturation

B. Precontemplation, contemplation, preparation, action, maintenance

C. Knowledge, awareness, acceptance, compliance

D. Initiation, growth, maturity, decline

In the Transtheoretical Model, behavior change unfolds as a person progresses through stages of readiness: precontemplation (not yet considering change), contemplation (aware a change is needed and weighing options), preparation (getting ready to change with concrete plans), action (actively making the behavior change), and maintenance (sustaining the change over time and preventing relapse). This sequence precisely locates how someone moves from no intention to change to long-term adherence, which is why that set of stages is the best fit. The other sets use terms that don't map onto the personal change process—one describes a general lifecycle or adoption path, another uses generic knowledge/acceptance/compliance terms, and the last follows product-like lifecycle stages—so they don't reflect the stages of readiness and maintenance central to the model.

9. Which statement correctly defines incidence and prevalence?

A. Incidence is the total number of existing cases at a given time; Prevalence is the rate of new cases over a period in a population at risk.

B. Incidence is the rate of new cases over a period in a population at risk; Prevalence is the total number of existing cases at a given time.

C. Both incidence and prevalence measure new cases over time.

D. Prevalence measures only severe cases while incidence measures all new cases.

Incidence vs prevalence describes two different ways of looking at disease in a population. Incidence is the rate at which new cases occur over a specified period in the population that is at risk, usually expressed as a rate (for example, new cases per 1,000 people per year). Prevalence is the total number of existing cases at a given time, reflecting how widespread the disease is at that moment, typically expressed as a proportion or percent. So the statement that incidence is the rate of new cases over a period in a population at risk, while prevalence is the total number of existing cases at a given time, is correct. This highlights the distinct roles: incidence measures risk of developing disease, prevalence measures overall disease burden. The other options mix up these definitions or add unsupported claims (for example, prevalence counting only severe cases).

10. Which practice is essential for safe perinatal immunizations and childhood vaccines?

A. Maintaining cold chain

B. Administering vaccines without verifications

C. Ignoring contraindications

D. Scheduling all vaccines in one visit

Maintaining the cold chain is essential because vaccines are temperature-sensitive and must stay within strict storage temperatures from manufacture to administration. When the cold chain is kept intact, vaccine potency is preserved, so the vaccine can provoke the intended immune response and keep people safe. For perinatal immunizations and childhood vaccines, this means reliable refrigeration, continuous temperature monitoring, proper transport with validated coolers, and timely use before expiry. Practices that skip verifications, ignore contraindications, or assume all vaccines must be given in one visit can lead to errors or unsafe administration, while the key aim is to deliver effective vaccines under safe, guideline-consistent conditions.

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://elseviercommhealth1and2.examzify.com

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