

Fellowship of the Higher Education Academy (FHEA) Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of 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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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!

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Questions

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- 1. Which of the following changes will likely not decrease fall risk in an elderly patient?**
 - A. Discontinuing lorazepam (Ativan®)**
 - B. Switching from duloxetine (Cymbalta®) to nortriptyline (Pamelor®)**
 - C. Decreasing the diuretic dose**
 - D. Switching from a sulfonylurea to a DPP-4 inhibitor**
- 2. The characteristic murmur of mitral valve insufficiency is best identified by:**
 - A. Diastolic with radiation to the neck**
 - B. Mid-late systole with a "snap"**
 - C. Diastolic and generalized across the precordium**
 - D. Systolic with radiation to the axillae**
- 3. What is an expected outcome of employing interdisciplinary teaching in courses?**
 - A. Students develop a narrowed focus on one subject**
 - B. Students gain a well-rounded understanding of complex issues**
 - C. Faculty members become less engaged**
 - D. Students are discouraged from critical thinking**
- 4. Which of the following medications should be avoided in a 61-year-old patient with a history of hypertension and NSTEMI?**
 - A. Antihistamine nasal spray**
 - B. Leukotriene modifier**
 - C. Oral decongestant**
 - D. Intranasal corticosteroid**
- 5. What is the key distinguishing factor between a macule and a patch?**
 - A. Configuration**
 - B. Disease state**
 - C. Size**
 - D. Location**

6. What is the function of the cranial nerve III?

- A. Ocular movement**
- B. Facial sensation**
- C. Smell**
- D. Hearing**

7. Which physical examination finding is expected in a patient with suspected appendicitis?

- A. Murphy's sign**
- B. A palpable left lower quadrant mass**
- C. Perumbilical ecchymosis**
- D. A positive obturator sign**

8. What are the three key areas of activity defined in the UKPSF for higher education educators?

- A. Research, community engagement, and assessment**
- B. Teaching, support for learning, and curriculum development**
- C. Teaching, support for learning, and assessment and feedback**
- D. Facilitation, evaluation, and mentorship**

9. According to the principle of veracity, healthcare providers must:

- A. Be truthful and avoid deception**
- B. Allocate resources fairly**
- C. Treat all people in the same manner**
- D. Stay faithful to their commitments**

10. Sulfonylureas primarily affect which of the following processes in the body?

- A. Insulin receptor site activity**
- B. Hepatic glucose production**
- C. Insulin release**
- D. Renal glucose excretion**

Answers

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

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Explanations

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1. Which of the following changes will likely not decrease fall risk in an elderly patient?

- A. Discontinuing lorazepam (Ativan®)**
- B. Switching from duloxetine (Cymbalta®) to nortriptyline (Pamelor®)**
- C. Decreasing the diuretic dose**
- D. Switching from a sulfonylurea to a DPP-4 inhibitor**

Switching from duloxetine (Cymbalta®) to nortriptyline (Pamelor®) is the change that is least likely to decrease fall risk in an elderly patient. Duloxetine, which is a serotonin-norepinephrine reuptake inhibitor (SNRI), is often prescribed for conditions like depression and anxiety, and it has been shown to have a favorable safety profile regarding falls in older adults. In contrast, nortriptyline is a tricyclic antidepressant (TCA) that is associated with more anticholinergic side effects, such as sedation, confusion, and hypotension, all of which can increase the risk of falls. In addition, while patients with specific conditions may benefit from switching medications, in general, the switch to nortriptyline may expose the elderly patient to a higher chance of adverse effects that contribute to instability and fall risk. Therefore, this medication change does not align with strategies aimed at reducing fall risk, highlighting its potential to inadvertently worsen the patient's overall safety profile.

2. The characteristic murmur of mitral valve insufficiency is best identified by:

- A. Diastolic with radiation to the neck**
- B. Mid-late systole with a "snap"**
- C. Diastolic and generalized across the precordium**
- D. Systolic with radiation to the axillae**

The characteristic murmur of mitral valve insufficiency is a systolic murmur that is best heard at the apex of the heart and often radiates to the left axilla. This is due to the backward flow of blood from the left ventricle into the left atrium during ventricular contraction, which creates a turbulent blood flow that produces the murmur. The timing of this murmur coincides with systole, reinforcing the association between the valve dysfunction and the systolic phase of the cardiac cycle. In contrast, other options describe different types of murmurs that are associated with distinct cardiac conditions. Diastolic murmurs are typically related to conditions such as aortic regurgitation or mitral stenosis, and they would not be characterized as systolic with radiation. The mention of a "snap" refers more to the murmur associated with mitral stenosis due to the opening of the stenotic mitral valve, which occurs in diastole. Moreover, a generalized diastolic murmur is not characteristic of mitral valve insufficiency. Thus, the specific features of the murmur associated with mitral valve insufficiency—its timing, location, and radiation—clearly align with the correct choice.

3. What is an expected outcome of employing interdisciplinary teaching in courses?

- A. Students develop a narrowed focus on one subject**
- B. Students gain a well-rounded understanding of complex issues**
- C. Faculty members become less engaged**
- D. Students are discouraged from critical thinking**

The expected outcome of employing interdisciplinary teaching is that students gain a well-rounded understanding of complex issues. This teaching approach integrates insights and methodologies from multiple disciplines, enabling students to see connections between different fields of knowledge. As a result, learners are better equipped to tackle multifaceted problems and comprehend how various factors interrelate in real-world contexts. Interdisciplinary teaching encourages critical thinking and problem-solving skills, as students must synthesize information from various domains and apply it in innovative ways. This holistic approach not only enriches their educational experience but also prepares them for the complexities of modern society, where issues often transcend the boundaries of individual disciplines. By engaging with diverse perspectives, students learn to appreciate the depth and breadth of knowledge that contributes to informed decision-making and insight.

4. Which of the following medications should be avoided in a 61-year-old patient with a history of hypertension and NSTEMI?

- A. Antihistamine nasal spray**
- B. Leukotriene modifier**
- C. Oral decongestant**
- D. Intranasal corticosteroid**

The choice to avoid an oral decongestant in a 61-year-old patient with a history of hypertension and NSTEMI is based on the pharmacological effects of these medications. Oral decongestants, such as pseudoephedrine, can cause vasoconstriction and increase blood pressure by stimulating alpha-adrenergic receptors. This effect can be particularly concerning in patients with a history of hypertension or cardiovascular conditions like NSTEMI, as it may exacerbate their existing health issues, potentially leading to complications. In contrast, other options such as antihistamine nasal sprays, leukotriene modifiers, and intranasal corticosteroids do not typically have the same hypertensive effects and may be safer alternatives for managing symptoms like nasal congestion in this patient population. Antihistamine nasal sprays generally work locally with minimal systemic absorption, while leukotriene modifiers and intranasal corticosteroids target inflammation without significantly impacting blood pressure. Therefore, avoiding oral decongestants in this context is a cautious approach to minimize the risk of worsening hypertension and potential cardiac events.

5. What is the key distinguishing factor between a macule and a patch?

- A. Configuration**
- B. Disease state**
- C. Size**
- D. Location**

The key distinguishing factor between a macule and a patch is indeed size. A macule is defined as a flat, circumscribed area of skin that is different in color from the surrounding skin and is typically less than 1 centimeter in diameter. In contrast, a patch is similar in nature but measures 1 centimeter or larger across. This distinction is commonly used in dermatology to categorize skin lesions based on their dimensions. While configuration, disease state, and location can influence the interpretation and significance of these skin features, they do not serve as defining criteria for differentiating between a macule and a patch. The explicit focus on size establishes a clear and objective way to classify these lesions within clinical practice.

6. What is the function of the cranial nerve III?

- A. Ocular movement**
- B. Facial sensation**
- C. Smell**
- D. Hearing**

The function of cranial nerve III, also known as the oculomotor nerve, is primarily related to ocular movement. It plays a crucial role in controlling several eye muscles, which are responsible for various eye movements such as looking up, down, and inward. Additionally, cranial nerve III is involved in controlling the muscles that adjust the size of the pupil and the shape of the lens for focusing. This means that its role goes beyond just moving the eyes; it also contributes significantly to visual acuity and light regulation. While cranial nerve III is involved in functions essential for vision, the other options pertain to different cranial nerves: facial sensation is primarily linked to cranial nerve V (trigeminal nerve), smell is associated with cranial nerve I (olfactory nerve), and hearing involves cranial nerve VIII (vestibulocochlear nerve). Therefore, understanding the specific role of cranial nerve III in eye movement enhances the overall comprehension of cranial nerve functions in the human body.

7. Which physical examination finding is expected in a patient with suspected appendicitis?

- A. Murphy's sign**
- B. A palpable left lower quadrant mass**
- C. Perumbilical ecchymosis**
- D. A positive obturator sign**

A positive obturator sign is a physical examination finding that may indicate appendicitis, particularly when the appendix is located in an atypical position, such as in the pelvis. The obturator sign tests for irritation of the obturator internus muscle, which can occur when the inflamed appendix is in close proximity to it. When a provider flexes the patient's hip and knee and then internally rotates the leg, pain in the lower abdomen suggests that there may be inflammation or irritation. Other signs related to appendicitis include tenderness in the right lower quadrant and rebound tenderness. However, the obturator sign specifically reflects the underlying inflammation affecting the pelvic structures, which is why it is associated with appendicitis. The other options present findings or signs that are not typically associated with appendicitis. Murphy's sign is used to assess gallbladder disease, a palpable left lower quadrant mass could indicate other conditions such as diverticulitis, and perumbilical ecchymosis (Cullen's sign) typically suggests a more severe condition, such as hemorrhagic pancreatitis or ruptured ectopic pregnancy, rather than appendicitis specifically.

8. What are the three key areas of activity defined in the UKPSF for higher education educators?

- A. Research, community engagement, and assessment**
- B. Teaching, support for learning, and curriculum development**
- C. Teaching, support for learning, and assessment and feedback**
- D. Facilitation, evaluation, and mentorship**

The three key areas of activity defined in the UK Professional Standards Framework (UKPSF) for higher education educators encompass teaching, support for learning, and assessment and feedback. This framework is designed to enhance the quality of learning and teaching in higher education. Teaching refers to the ways in which educators facilitate student learning, ensuring that their approaches are effective and inclusive. Support for learning highlights the importance of providing guidance and assistance to students beyond traditional teaching methods, helping them to engage with the material and reach their academic goals. Assessment and feedback are crucial for measuring student progress and understanding. This area emphasizes the necessity of not only evaluating student performance but also providing constructive and timely feedback that can help learners improve. In contrast, the other options mentioned may include relevant activities, but they do not align as closely with the specific framework outlined by the UKPSF. For instance, while research and community engagement are important aspects of academic life, they are not highlighted as key areas of activity for the purposes of the UKPSF focus on teaching excellence.

9. According to the principle of veracity, healthcare providers must:

- A. Be truthful and avoid deception**
- B. Allocate resources fairly**
- C. Treat all people in the same manner**
- D. Stay faithful to their commitments**

The principle of veracity emphasizes the importance of truthfulness and the ethical obligation for healthcare providers to convey accurate and complete information to patients. By adhering to this principle, providers foster trust in the patient-provider relationship and ensure patients have the necessary information to make informed decisions about their care. This commitment to honesty is crucial in maintaining the integrity of health services and supports the ethical foundation of medical practice. While the other options address important ethical considerations in healthcare, they do not specifically pertain to the principle of veracity. For instance, fairness in resource allocation and equal treatment are more closely related to principles of justice, while fidelity to commitments relates to loyalty and promise-keeping in professional relationships. However, the essence of veracity is solely about truthfulness and transparency, making the selection of the first choice the most appropriate in this context.

10. Sulfonylureas primarily affect which of the following processes in the body?

- A. Insulin receptor site activity**
- B. Hepatic glucose production**
- C. Insulin release**
- D. Renal glucose excretion**

Sulfonylureas primarily act by stimulating the pancreas to release insulin. They do this by binding to specific receptors on the surface of pancreatic beta cells, which leads to an increase in insulin secretion in response to elevated blood glucose levels. This mechanism is central to their role in managing blood sugar levels, particularly in individuals with type 2 diabetes. Insulin release is crucial because it helps lower blood glucose levels after meals and improves the body's overall insulin sensitivity. By enhancing insulin secretion, sulfonylureas effectively help control hyperglycemia, making them a key therapeutic option for enhancing glycemic control. The other options represent different processes that are not the primary action of sulfonylureas. While insulin receptor site activity is related to how cells respond to insulin, sulfonylureas do not directly influence this. Hepatic glucose production refers to the liver's ability to produce glucose, which is not directly impacted by sulfonylureas, although they can have secondary effects on this process. Lastly, renal glucose excretion pertains to the kidneys' role in glucose handling, which is again unrelated to the primary mechanism of action of sulfonylureas. Thus, the focus on insulin release accurately captures the primary effect of this class of medication

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://fellowshiphigheredacademy.examzify.com>

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

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