

FLIGHT SURGEON MODULE B 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 protein within red blood cells carries oxygen by binding it to iron and is composed of four protein chains?**
 - A. Myoglobin
 - B. Fibrin
 - C. Albumin
 - D. Hemoglobin
- 2. Which of the following are common signs of motion sickness?**
 - A. Headache
 - B. Rash
 - C. Nausea, pallor, cold sweats
 - D. Dizziness only
- 3. Which of the following is NOT listed as a symptom of toxic fuel exposure?**
 - A. Lightheadedness and confusion
 - B. Fatigue
 - C. Coughing
 - D. Chills
- 4. Which vision type describes night vision with rods only?**
 - A. Photopic
 - B. Mesopic
 - C. Scotopic
 - D. None
- 5. Motion sickness management permits up to 3 flights and requires accompaniment by an instructor pilot. Which option matches this rule?**
 - A. Scopolamine transdermal
 - B. Dexedrine
 - C. Promethazine/Ephedrine
 - D. Metoclopramide

- 6. Which of the following are the measurable characteristics of sound?**
- A. Pitch
 - B. Frequency, Intensity, and Duration
 - C. Quality
 - D. Timbre
- 7. What are two types of noise?**
- A. Steady-state (Continuous) and Impulse
 - B. Random and Periodic
 - C. Intermittent and Repetitive
 - D. Narrowband and Broadband
- 8. Which factor is described as affecting the severity of accelerations due to the axis of acceleration?**
- A. Impact Direction
 - B. Rate of Onset
 - C. Body Area
 - D. Duration
- 9. Which visual illusion is caused by tall grass or similar textures that makes a pilot continuously input the flight controls?**
- A. False Horizon
 - B. Height/Depth Illusion
 - C. Induced Motion
 - D. Size/Distance Illusion
- 10. True or False: Central vertigo can be aggravated by lack of proprioception in the extremities.**
- A. True
 - B. False
 - C. Not enough information
 - D. Sometimes true, sometimes false

Answers

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

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Explanations

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1. Which protein within red blood cells carries oxygen by binding it to iron and is composed of four protein chains?

- A. Myoglobin
- B. Fibrin
- C. Albumin
- D. Hemoglobin**

This question targets understanding the oxygen-carrying protein inside red blood cells and its four-chain structure. Hemoglobin fits this description: it is a tetramer made of four polypeptide chains (two alpha and two beta in adults) and contains four heme groups, each with iron that binds one oxygen molecule. This setup allows hemoglobin to pick up oxygen in the lungs and release it in tissues, with cooperative binding that makes it efficient. Myoglobin, by contrast, is a single-chain oxygen-binding protein in muscle and does not form a tetramer, so it primarily stores oxygen rather than transports it. Fibrin is a clotting protein, and albumin is a plasma protein that helps maintain blood volume, not an oxygen carrier inside red blood cells. So the protein described is hemoglobin.

2. Which of the following are common signs of motion sickness?

- A. Headache
- B. Rash
- C. Nausea, pallor, cold sweats**
- D. Dizziness only

Motion sickness happens when the brain receives conflicting signals about motion from the eyes and inner ear, triggering autonomic responses. The most characteristic signs are nausea along with pallor (pale skin) and cold sweats, reflecting sympathetic activation. Nausea is the most prominent symptom, and the combination of pallor and sweating makes this trio the classic presentation. Headache can occur but isn't as specific, rash isn't related to motion sickness, and dizziness may occur but isn't the defining cluster of signs.

3. Which of the following is NOT listed as a symptom of toxic fuel exposure?

- A. Lightheadedness and confusion
- B. Fatigue
- C. Coughing
- D. Chills**

Exposure to toxic fuels tends to show up with nervous system and respiratory effects. Inhaled fuels can cause lightheadedness and confusion as the CNS is affected, and fatigue is a common nonspecific symptom of exposure. Coughing often results from airway irritation due to fumes. Chills, on the other hand, are not typically listed as a symptom of toxic fuel exposure; they're more commonly associated with fever or cold exposure, not inhalation injuries. So the symptom that does not fit the usual exposure pattern is chills.

4. Which vision type describes night vision with rods only?

- A. Photopic
- B. Mesopic
- C. Scotopic**
- D. None

The concept is rod-dominated, low-light vision. Scotopic vision describes this state where rods are the primary active photoreceptors in dim conditions. Rods are extremely sensitive to light, which lets you see at night, but they give grayscale vision and poorer detail since they do not convey color. Cones, which provide color and sharp detail, require more light and hence operate mainly in photopic (daylight) vision. In between, mesopic vision is when both rods and cones contribute. So night vision with rods only is scotopic vision.

5. Motion sickness management permits up to 3 flights and requires accompaniment by an instructor pilot. Which option matches this rule?

- A. Scopolamine transdermal
- B. Dexedrine
- C. Promethazine/Ephedrine**
- D. Metoclopramide

Motion sickness medications in aviation are regulated because they can affect performance, so some drugs are only allowed with supervision and for a limited number of flights. The option that matches the rule is promethazine with ephedrine. Promethazine helps prevent motion sickness, and ephedrine provides a mild stimulant effect to counteract drowsiness, helping maintain alertness during flight. This combination has historically been approved for use with up to three flights under the accompaniment of an instructor pilot, fitting the requirement you're asked about. The other medications either don't align with that supervised, limited-flight rule or aren't used in this context for motion sickness: scopolamine is more likely to impair performance or carry stricter restrictions; dexedrine is a stimulant not used for motion sickness with this flight-rule framework; metoclopramide is an antiemetic without the specific three-flight supervision allowance.

6. Which of the following are the measurable characteristics of sound?

- A. Pitch
- B. Frequency, Intensity, and Duration**
- C. Quality
- D. Timbre

Sound has quantifiable physical properties. Frequency measures how often the pressure wave repeats each second, and this is what determines the perceived pitch. Intensity describes the energy of the wave, relating to how loud it sounds. Duration is simply how long the sound lasts. Together, these three capture the basic measurable aspects of a sound signal. Pitch, while closely linked to frequency, is a perceptual attribute rather than a direct physical measurement. Timbre—or quality—depends on the harmonic content and envelope of the sound and isn't captured by a single measurement; it's described by multiple spectral and temporal characteristics.

7. What are two types of noise?

A. Steady-state (Continuous) and Impulse

B. Random and Periodic

C. Intermittent and Repetitive

D. Narrowband and Broadband

Two common ways to describe noise in acoustics focus on how it behaves over time: whether it lasts continuously or comes as brief bursts. Steady-state, or continuous, noise is ongoing and relatively constant in level—think of a running engine or ventilation hum. Impulse noise, on the other hand, consists of very short, high-intensity bursts, like a gunshot or an explosion. These two kinds differ in how they deliver energy over time and in their effects on hearing and measurement: continuous noise is evaluated with measures that reflect sustained energy over a period (like an equivalent continuous level), while impulse noise is evaluated by peak levels and short-duration energy, since the brief spike can cause damage even if average energy is not extremely high. This distinction is especially practical because the mitigation and regulatory considerations differ for the two. The other options describe different aspects—random vs periodic refers to predictability rather than duration; intermittent vs repetitive is vague and not a standard diagnostic split; narrowband vs broadband describes spectral content, which, while related to noise, doesn't define the fundamental temporal nature of the noise in the same way. The steady-state versus impulse classification captures the essential contrast in how noise presents over time and how we assess and manage its impact.

8. Which factor is described as affecting the severity of accelerations due to the axis of acceleration?

A. Impact Direction

B. Rate of Onset

C. Body Area

D. Duration

The key idea is that how severe an acceleration feels to the body depends on the direction the force is applied relative to your body's orientation and restraints. Accelerations along different axes load the body in different ways, so the same magnitude of force can cause different stresses on the spine, chest, or abdomen depending on the direction. The way restraints and seating transmit energy also varies by direction, shaping the peak forces experienced and the injury risk. That's why the factor describing how accelerations are affected by the axis of acceleration is the direction of the impact itself. Rate of onset, duration, and which body area is exposed also matter, but they describe other aspects, not the axis direction.

9. Which visual illusion is caused by tall grass or similar textures that makes a pilot continuously input the flight controls?

A. False Horizon

B. Height/Depth Illusion

C. Induced Motion

D. Size/Distance Illusion

Dense ground texture from tall grass can create a misleading line that the eye interprets as the horizon. When your visual system locks onto that apparent horizon, you end up repeatedly adjusting the aircraft to stay "level" with it, even though the true horizon is elsewhere. This is a false horizon illusion—the ground texture forms a misleading reference line that drives continuous control inputs. Other illusions involve motion perception from surrounding scenery, or depth cues and object size giving misjudged distance, but they don't describe the grass-generated horizon misperception that leads to persistent control inputs.

10. True or False: Central vertigo can be aggravated by lack of proprioception in the extremities.

A. True

B. False

C. Not enough information

D. Sometimes true, sometimes false

At the core, vertigo that comes from the brain (central vertigo) reflects a disruption in how the brain processes and integrates signals from the vestibular system with other senses. Proprioception provides the brain with information about where the limbs are in space. When proprioceptive input is lacking or impaired, the brain has less reliable information about the body's position, so it must rely more on vestibular and visual cues to maintain balance. If central processing is already compromised, this added unreliability from proprioceptive loss can amplify dizziness and imbalance. In other words, central vertigo can be aggravated when proprioceptive input is diminished because the CNS struggles to reconcile conflicting sensory information, making the perception of spinning or swaying more pronounced. In summary, central vertigo is compatible with and can be worsened by lack of proprioception in the extremities.

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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://flightsurgeonmodb.examzify.com>

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

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