

HAS 107F - Medical and Individual Readiness 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

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- 1. Which of the following is NOT one of the categories the DAWG may assign?**
 - A. Medical Retirement**
 - B. MEB Recommended**
 - C. Return to Duty**
 - D. Other**

- 2. What are the two main MEDPROS readiness statuses used for deployment?**
 - A. MR and SRP**
 - B. MR and NMR**
 - C. Ready and Deferred**
 - D. Deployed and Not Deployed**

- 3. Non-Secure Internet Protocol (NIPR) is best described as what?**
 - A. A classified computer used by the MTF to communicate**
 - B. A secure network**
 - C. An unclassified computer used by the MTF to communicate**
 - D. A satellite terminal**

- 4. How is immunization compliance defined?**
 - A. Vaccines must be documented in a personal log only.**
 - B. All required vaccines are up-to-date and properly documented for deployment.**
 - C. Vaccines are optional if the Soldier feels healthy.**
 - D. Vaccines are not needed if the Soldier has recently recovered from illness.**

- 5. In the SRP context, what is the implication if a dental condition is not treated before deployment?**
 - A. It is ignored during deployment.**
 - B. It will result in immediate medical discharge.**
 - C. It could impede deployment and require treatment before deployment.**
 - D. It only affects future deployments.**

- 6. Which system is used to track diagnoses, procedures, and vaccines for Soldiers?**
- A. MEDPROS**
 - B. DEERS**
 - C. CHCS**
 - D. DMHRSi**
- 7. The PEBLO will enter the initial case information into VTA within how many calendar days?**
- A. Three days**
 - B. Five days**
 - C. Seven days**
 - D. Ten days**
- 8. Which statement best describes the DRRS function's focus given the provided material?**
- A. It provides enhanced visibility**
 - B. It supports combat ready forces**
 - C. It assigns personnel to Unit Type Codes and MCRP teams**
 - D. It tracks medical data**
- 9. Which option is NOT a DAWG category?**
- A. Medical Retirement**
 - B. MEB Recommended**
 - C. Return to Duty**
 - D. Other**
- 10. How are immunization records verified during SRP?**
- A. Through self-report only.**
 - B. By external civilian records.**
 - C. Through MEDPROS data, and supporting documents from the MTF.**
 - D. By dental exam results.**

Answers

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

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Explanations

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1. Which of the following is NOT one of the categories the DAWG may assign?

- A. Medical Retirement**
- B. MEB Recommended**
- C. Return to Duty**
- D. Other**

The important idea is how DAWG classifies medical readiness outcomes. DAWG typically assigns dispositions that indicate whether a service member can return to duty, needs to go through a Medical Evaluation Board, or falls into another administrative category. The three commonly used categories are Return to Duty (the member is medically fit to continue serving), MEB Recommended (the member should undergo an MEB to evaluate fitness for duty), and Other (a catch-all for dispositions that don't fit the first two). Medical Retirement isn't a DAWG category. Retirement for medical reasons is a separate outcome that comes from the broader disability evaluation process (MEB/PEB) and the member's overall service status, not from the DAWG's immediate disposition. So it isn't among the DAWG's assigned categories, which is why medical retirement is not the correct choice.

2. What are the two main MEDPROS readiness statuses used for deployment?

- A. MR and SRP**
- B. MR and NMR**
- C. Ready and Deferred**
- D. Deployed and Not Deployed**

The key idea is how MEDPROS signals whether a soldier can be deployed. For deployment, the two main readiness statuses are Medically Ready and Not Medically Ready. Medically Ready means all medical requirements are current and there are no active medical issues that would prevent deployment; the soldier is cleared to deploy. Not Medically Ready means there are medical conditions or outstanding medical requirements that must be addressed before deployment, so medical actions, follow-ups, or waivers are needed first. Other terms or processes you might hear (like SRP) refer to different readiness steps, not the core MEDPROS deployment readiness status.

3. Non-Secure Internet Protocol (NIPR) is best described as what?

- A. A classified computer used by the MTF to communicate**
- B. A secure network**
- C. An unclassified computer used by the MTF to communicate**
- D. A satellite terminal**

Non-Secure Internet Protocol (NIPR) refers to the unclassified DoD network used for routine communications. It carries information that isn't classified and is what a Medical Treatment Facility would use for everyday tasks like email, web access, and other non-sensitive communications within the DoD. The term "Non-Secure" highlights that it's not intended for handling classified materials, unlike secure networks such as SIPRNet. It's not a single classified computer, not a secure network in the sense of protecting classified data, and not a satellite terminal. In this context, describing NIPR as an unclassified system used by the MTF to communicate is the best fit.

4. How is immunization compliance defined?

- A. Vaccines must be documented in a personal log only.
- B. All required vaccines are up-to-date and properly documented for deployment.**
- C. Vaccines are optional if the Soldier feels healthy.
- D. Vaccines are not needed if the Soldier has recently recovered from illness.

Immunization compliance means you are current with all required vaccines and your vaccine history is accurately documented in the official records so readiness can be verified for deployment. The key is not just having had vaccines, but having them up-to-date according to the service's schedule and having proper, accessible documentation that confirms your status. Relying on a personal log isn't enough because official records are needed to verify readiness during audits, medical in-processing, and deployment. Being healthy at a given moment doesn't replace the need for required vaccines, and recovering from illness doesn't automatically remove the obligation to stay current with the immunization schedule.

5. In the SRP context, what is the implication if a dental condition is not treated before deployment?

- A. It is ignored during deployment.
- B. It will result in immediate medical discharge.
- C. It could impede deployment and require treatment before deployment.**
- D. It only affects future deployments.

In SRP, dental readiness is part of overall military fitness for duty. If a dental condition isn't treated before deployment, it can become a barrier to deploying because the issue could worsen, cause pain or infection, or require urgent care in an austere environment. That means the service member may need to receive treatment before deployment or face delays or postponement of the deployment until the dental issue is addressed. It isn't simply ignored during deployment, nor does it automatically mean an immediate discharge, and it isn't something that only affects future deployments—the pre-deployment treatment ensures the current deployment can proceed smoothly.

6. Which system is used to track diagnoses, procedures, and vaccines for Soldiers?

- A. MEDPROS**
- B. DEERS**
- C. CHCS**
- D. DMHRSi**

This question asks which system holds a Soldier's medical readiness data, including health events like diagnoses, procedures, and vaccines. MEDPROS is the Army's system that tracks medical readiness information for service members, consolidating diagnoses, procedures, immunizations, and related health data so medical staff and commanders can quickly assess whether a Soldier is medically ready to deploy. The other systems serve different purposes: DEERS handles benefits eligibility and enrollment for Soldiers and their dependents; CHCS is the clinical information system used in military treatment facilities to manage patient care, orders, and records; DMHRSi manages human resources, manpower, and scheduling for medical personnel. So MEDPROS is the system specifically designed to track diagnoses, procedures, and vaccines for Soldiers.

7. The PEBLO will enter the initial case information into VTA within how many calendar days?

- A. Three days**
- B. Five days**
- C. Seven days**
- D. Ten days**

The main idea here is timely data entry into the system that begins the medical evaluation process. The PEBLO must input the initial case information into VTA within three calendar days to quickly establish the case in the workflow, coordinate with medical providers, and set the disability evaluation and benefits process in motion. Entering information within this short window helps prevent delays and keeps the overall timeline on track, even when weekends or holidays occur since calendar days count every day. Choosing a longer window would slow down the process, potentially delaying decisions about fitness for duty and benefits.

8. Which statement best describes the DRRS function's focus given the provided material?

- A. It provides enhanced visibility**
- B. It supports combat ready forces**
- C. It assigns personnel to Unit Type Codes and MCRP teams**
- D. It tracks medical data**

DRRS is all about knowing whether forces are ready to deploy and perform their missions. The main goal is to keep units deployment-capable by assessing readiness and highlighting gaps so leaders can address them and keep forces prepared for combat tasks. While the system does provide visibility into readiness data, that visibility serves the purpose of sustaining combat readiness. It isn't primarily about tracking medical data or assigning personnel to (Unit Type Codes) and MCRP teams, which are different administrative functions.

9. Which option is NOT a DAWG category?

- A. Medical Retirement**
- B. MEB Recommended**
- C. Return to Duty**
- D. Other**

DAWG categories describe the immediate disposition after medical review: Return to Duty, MEB Recommended, and Other are standard outcomes that indicate how a service member's medical status affects their duties. Medical Retirement isn't listed as a DAWG category because (in this framework) retirement due to medical reasons is handled through its own process outside the DAWG disposition set. So the status that doesn't fit as a DAWG category is Medical Retirement.

10. How are immunization records verified during SRP?

- A. Through self-report only.**
- B. By external civilian records.**
- C. Through MEDPROS data, and supporting documents from the MTF.**
- D. By dental exam results.**

During SRP, immunization records are verified by checking the official immunization history in MEDPROS and corroborating it with supporting documents from the MTF. MEDPROS serves as the centralized source for vaccine dates, types, and completion status, while the MTF provides the actual records and any notes needed to confirm accuracy. Relying on self-report isn't sufficient because records can be incomplete or inaccurate, and external civilian records aren't the primary source used in SRP. Dental exam results are unrelated to immunizations. This combined approach ensures an accurate, up-to-date immunization status for deployment readiness.

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://has107f.examzify.com>

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

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