

HAS 110 - Patient Movement Fundamentals Practice Exam (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. Who is responsible for classifying evacuee patients?**
 - A. Attending physician**
 - B. Nurse**
 - C. Transport officer**
 - D. Family member**

- 2. Which set of actions is most aligned with protecting skin during mobility in immobile patients?**
 - A. Regular repositioning every two hours, pressure-relieving supports, and minimizing shear.**
 - B. Deep cleaning the skin with soap during movement.**
 - C. Move the patient as rarely as possible.**
 - D. Keep all bed angles unchanged.**

- 3. What is a pivot transfer and when is it used?**
 - A. A pivot transfer involves stepping and turning the patient to a new surface with the patient bearing some weight; used when partial weight bearing is possible.**
 - B. A pivot transfer is simply sliding the patient from one surface to another with no weight bearing.**
 - C. A pivot transfer relies on equipment only and never requires the patient to bear weight.**
 - D. A pivot transfer is performed by lifting the patient with a hoist.**

- 4. Which statement best describes Class 6 Attendants?**
 - A. Attendants are patients**
 - B. The attendant is optional**
 - C. They must stay with the patient only until arrival**
 - D. Non patients must accompany the patient to the final destination**

- 5. Which of the following reflects a casualty nationality and status category?**
 - A. United States military**
 - B. United states civilian**
 - C. Military other than US military**
 - D. Civilian other than US civilian**

- 6. Which technique is used to move a patient while maintaining spinal alignment?**
- A. Log rolls to move the patient**
 - B. Twisting the spine while moving**
 - C. Jerking movements**
 - D. Slipping the patient across**
- 7. Which of the following statements describes the crew role during aeromedical evacuation?**
- A. Civilian volunteers with no medical training**
 - B. Pilots only**
 - C. Ground medical staff only**
 - D. Medical specialty aircraft crew**
- 8. How should you respond if a patient becomes faint during a transfer?**
- A. Stop immediately, lower the patient safely, check vital signs, and seek help if symptoms persist.**
 - B. Continue transfer quickly to finish.**
 - C. Ignore symptoms and proceed.**
 - D. Move the patient to a chair regardless of vitals.**
- 9. Which of the following is a casualty nationality and status category?**
- A. Civilian other than US civilian**
 - B. Enemy prisoner of war**
 - C. United States military**
 - D. Noncombatant observer**
- 10. Which items are considered Medical Reasons for evacuation?**
- A. Lack of adequate medical facilities locally**
 - B. Lack of professional medical staff**
 - C. Non-availability of medical equipment**
 - D. All of the above**

Answers

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

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Explanations

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1. Who is responsible for classifying evacuee patients?

- A. Attending physician**
- B. Nurse**
- C. Transport officer**
- D. Family member**

Classifying evacuee patients for evacuation priority is based on clinical assessment and decisions about who needs immediate care, who can be stabilized, and who can wait. The attending physician has the medical authority and expertise to evaluate condition, interpret symptoms and vital signs, and assign triage categories that determine who gets priority for transport and treatment. Nurses contribute data and monitor patients, but the physician integrates diagnosis, prognosis, and care needs to make the final classification. A transport officer handles movement logistics, and family members don't have the training to determine medical priority.

2. Which set of actions is most aligned with protecting skin during mobility in immobile patients?

- A. Regular repositioning every two hours, pressure-relieving supports, and minimizing shear.**
- B. Deep cleaning the skin with soap during movement.**
- C. Move the patient as rarely as possible.**
- D. Keep all bed angles unchanged.**

Protecting skin during mobility hinges on relieving pressure, minimizing shear, and using pressure-relieving supports. Regular repositioning—about every two hours—shifts the body off bony prominences, preventing prolonged pressure that can cut off blood flow and cause tissue damage. Pressure-relieving surfaces, like specialized mattresses or cushions, spread out body weight and reduce peak pressures on areas at risk (heels, sacrum, hips, etc.). Minimizing shear is essential because sliding or dragging the skin across sheets can tear or separate layers; using careful technique or lifting aids keeps the skin intact during movement. Deep cleaning with soap during movement isn't the focus and can dry or irritate the skin, which weakens its protective barrier. Moving the patient as rarely as possible and keeping bed angles unchanged maintain prolonged pressure and friction, increasing the risk of skin breakdown.

3. What is a pivot transfer and when is it used?

- A. A pivot transfer involves stepping and turning the patient to a new surface with the patient bearing some weight; used when partial weight bearing is possible.
- B. A pivot transfer is simply sliding the patient from one surface to another with no weight bearing.
- C. A pivot transfer relies on equipment only and never requires the patient to bear weight.
- D. A pivot transfer is performed by lifting the patient with a hoist.**

A pivot transfer is a move from one surface to another that uses a controlled, lifting-assisted arc to reposition the patient, protecting both patient and caregiver when weight bearing or participation by the patient is limited or unsafe. Using a hoist means the patient is lifted and moved with mechanical assistance rather than relying on the patient's own weight bearing or on sliding with minimal support. This approach is chosen when the patient cannot bear weight or participate safely, providing a stable, controlled transfer and reducing strain and risk of injury for staff. The other scenarios describe methods that rely on the patient bearing weight, sliding without weight bearing, or using equipment without involving any lifting. Those do not align with the situation where a hoist provides the safe, controlled pivot movement from one surface to another.

4. Which statement best describes Class 6 Attendants?

- A. Attendants are patients
- B. The attendant is optional
- C. They must stay with the patient only until arrival
- D. Non patients must accompany the patient to the final destination**

The main idea is that Class 6 Attendants are non-patient escorts who accompany a patient for the entire move to the final destination. This escort ensures safety, continuity of care, and proper handoff during transport, so their presence is required and extended all the way to where the patient will be received. They are not patients themselves, and their role isn't optional. They stay with the patient through to the final destination rather than only part of the way or just until arrival.

5. Which of the following reflects a casualty nationality and status category?

- A. United States military**
- B. United states civilian**
- C. Military other than US military**
- D. Civilian other than US civilian**

Casualty reporting uses a single label to capture both nationality and status (military vs civilian). The label that indicates a person is from the United States and is a member of the armed forces shows both the nationality and the military status together, which is the standard way to classify a U.S. service member casualty. That makes it the best choice for reflecting casualty nationality and status. The other options describe either civilians or non-U.S. personnel, which are separate categories and do not represent a U.S. service member.

6. Which technique is used to move a patient while maintaining spinal alignment?

- A. Log rolls to move the patient**
- B. Twisting the spine while moving**
- C. Jerking movements**
- D. Slipping the patient across**

Maintaining spinal alignment while moving a patient is the key idea. The technique that best accomplishes this is log rolling, which moves the patient as a single unit with the spine kept in a straight line. In practice, this means stabilizing the head and neck in line with the torso and coordinating a smooth, coordinated roll with the rest of the body, so the spine is not flexed, extended, or rotated during the transfer. This approach minimizes movement of the spine and helps prevent further injury when a spinal injury is suspected. Other methods like twisting the spine, jerking movements, or slipping the patient across do not preserve alignment and can create rotational, flexion/extension, or shear forces that may worsen injury. The log roll emphasizes controlled, synchronized motion to keep the spine aligned throughout the transfer.

7. Which of the following statements describes the crew role during aeromedical evacuation?

- A. Civilian volunteers with no medical training**
- B. Pilots only**
- C. Ground medical staff only**
- D. Medical specialty aircraft crew**

During aeromedical evacuation, moving patients by air requires a crew specifically trained to deliver medical care in flight while also handling aircraft operations. This is described as a medical specialty aircraft crew—the team onboard equipped to provide in-flight medical care, monitor the patient, manage life-support equipment, and communicate with the flight crew. Civilian volunteers with no medical training can't provide care; pilots alone don't cover medical needs; ground medical staff alone can't accompany the patient on a flight. The essence is that the crew combines medical expertise with aviation duties to ensure safe, effective in-flight patient transport.

8. How should you respond if a patient becomes faint during a transfer?

- A. Stop immediately, lower the patient safely, check vital signs, and seek help if symptoms persist.**
- B. Continue transfer quickly to finish.**
- C. Ignore symptoms and proceed.**
- D. Move the patient to a chair regardless of vitals.**

When a patient faints during a transfer, safety comes first and the goal is to prevent injury while quickly assessing stability. The immediate move is to stop all movement and lower the patient safely to the floor or a chair in a controlled way so they don't fall or get hurt. Lying flat (or positioning to optimize blood flow if lying isn't possible) helps restore cerebral perfusion and reduces the risk of a collapse causing injury. After they're settled, check vital signs and responsiveness to gauge how stable they are and monitor closely. If symptoms continue, if vitals are unstable, or if the patient loses consciousness, seek help right away for medical assessment and support. Do not resume the transfer until the patient is evaluated and cleared. If the patient stabilizes, continue to observe and only proceed with transfer after reassessment or medical guidance.

9. Which of the following is a casualty nationality and status category?

- A. Civilian other than US civilian**
- B. Enemy prisoner of war**
- C. United States military**
- D. Noncombatant observer**

Casualty nationality and status categories tell you who the person is and what their condition or custody status is. An enemy prisoner of war clearly combines both: a nationality (enemy) and a status (prisoner of war). This designation directly informs how the person is to be treated, documented, and moved for medical care and processing. The other options describe civilian status, US military affiliation, or a noncombatant role, none of which pair a nationality with a specific custody or capture status in a single category. Hence, this term uniquely fits the idea of a casualty nationality and status category.

10. Which items are considered Medical Reasons for evacuation?

- A. Lack of adequate medical facilities locally**
- B. Lack of professional medical staff**
- C. Non-availability of medical equipment**
- D. All of the above**

Medical reasons for evacuation occur when the patient needs care that cannot be safely provided at the current location. If local facilities are inadequate, if there is a lack of professional medical staff, or if essential medical equipment is unavailable, the patient's safety and health are at risk and moving to a higher level of care is indicated. Each of these scenarios alone can justify evacuation, and together they cover the full range of reasons that prompt transfer. That's why the option encompassing all of the above is the best answer.

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://has110.examzify.com>

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

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