HOSPITAL CORPSMAN (HM) PERSONNEL QUALIFICATION STANDARDS (PQS) 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

1. Guaifenesin is commonly marketed under which trade name?

A. Delsym

B. Mucinex

C. Robitussin

D. Benadryl

2. What term describes the process of transmission of infection through various links?

A. Latent infection

B. Direct contact

C. Chain of infection

D. Reservoir

3. How should sharps containers be prepared for transport to treatment or storage areas?

A. Transport sharps in a cart.

B. Place sharps containers in a second container (plastic bag or rigid box) that is labeled and/or color coded.

C. Use unlabelled containers without color coding.

D. Place sharps containers directly on the floor for easy access.

4. What is the normal adult systolic/diastolic blood pressure range?

A. 90/60-120/80

B. 100/60-130/85

C. 80/50-110/70

D. 110/70-140/90

5. What action is taken when a member is placed on the retired list or Fleet Reserve List?

A. Close the Health Record.

B. Archive the Health Record but keep it active.

C. Destroy the Health Record.

D. Transfer to civilian personnel file.

6. Which step is essential to verify IV catheter patency after insertion?

A. Flush with normal saline and observe for flow

B. Use sterile technique

C. Leave the tourniquet in place

D. Tape the IV without securing

7. Which action is part of the 3 checks of medication administration?

A. Verify the medication against the MAR at the bedside

B. Consult the doctor for every dose

C. Record only at the end of shift

D. Leave the medication at the nurse's station

8. Who is responsible for carrying out medical surveillance duties within a medical department?

A. Administrative staff

B. External contractors

C. Only the on-duty nurse

D. Medical department personnel across the unit

9. BUMEDINST 6440.5D governs which program?

A. Policy for sourcing and deploying Budget Submitting Office (BSO) 18 personnel to augment DoD joint staff, OPNAV HQ, HQMC, and USFF

B. Policy for credentialing medical staff

C. Policy for patient privacy rights

D. Policy for clinical training standards

10. Which items are included under administrative tools for AHLTA and CHCS?

A. Screening: hearing, hearing aid, dental, dental readiness, medical assessment.

B. Screening: hearing, hearing aid, dental readiness, patient satisfaction surveys

C. Qualifications: credentialing and privileging

D. Clinical decision support: coding guidelines

Answers

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

Explanations

1. Guaifenesin is commonly marketed under which trade name?

A. Delsym

B. Mucinex

C. Robitussin

D. Benadryl

Guaifenesin is an expectorant used to thin and loosen mucus, helping you cough it up more easily. The trade name most strongly associated with this active ingredient in over-the-counter products is Mucinex. It's the brand that has become the go-to for guaifenesin formulations, often as extended-release tablets designed to be taken once daily. The other options correspond to different ingredients or formulations: Delsym is known for a cough suppressant containing dextromethorphan, not guaifenesin; Robitussin is a brand with various formulas, some containing guaifenesin among other actives, but it's not the brand that uniquely identifies guaifenesin; Benadryl is an antihistamine used for allergies and cough but not the guaifenesin line.

2. What term describes the process of transmission of infection through various links?

A. Latent infection

B. Direct contact

C. Chain of infection

D. Reservoir

Transmission of infection happens through a sequence of linked steps. The term that best describes this process is the chain of infection, which includes the pathogen, its reservoir, a portal of exit, a mode of transmission, a portal of entry, and a susceptible host. Any one link can be interrupted to stop spread—hand hygiene breaks the mode of transmission, proper sterilization removes the pathogen from equipment (affecting the reservoir), and vaccination lowers the number of susceptible hosts. For context, latent infection refers to a pathogen present without symptoms, direct contact is one way a pathogen can be transmitted but not the entire process, and a reservoir is simply where the pathogen survives.

3. How should sharps containers be prepared for transport to treatment or storage areas?

A. Transport sharps in a cart.

B. Place sharps containers in a second container (plastic bag or rigid box) that is labeled and/or color coded.

C. Use unlabelled containers without color coding.

D. Place sharps containers directly on the floor for easy access.

Transporting sharps safely relies on providing a secondary layer of containment. Place the sharps container inside a second container, such as a plastic bag or a rigid box, to create an extra barrier that helps prevent leaks or punctures during handling. The secondary container should be clearly labeled and/or color coded so all staff can quickly identify it as sharps waste and follow the correct handling and disposal procedures. This setup protects personnel and surfaces from exposure and supports proper waste management. Choosing not to use secondary containment, or using unlabelled or non–color-coded containers, increases the risk of spills, injuries, and mix-ups. Placing containers directly on the floor also heightens contamination risk and makes transport and disposal less safe.

4. What is the normal adult systolic/diastolic blood pressure range?

A. 90/60-120/80

B. 100/60-130/85

C. 80/50-110/70

D. 110/70-140/90

Normal adult blood pressure combines two numbers: systolic pressure, the force in the arteries when the heart beats, and diastolic pressure, the pressure when the heart rests between beats. For a healthy adult at rest, these values typically sit around 90–120 mmHg for systolic and 60–80 mmHg for diastolic. That gives a normal range of about 90/60 to 120/80. This window reflects sufficient blood flow to organs without the risks associated with too-low pressure (hypotension) or too-high pressure (hypertension). The other ranges either dip below the normal lower end, posing a risk of inadequate perfusion, or rise above the normal upper end, where readings are considered elevated or hypertensive.

5. What action is taken when a member is placed on the retired list or Fleet Reserve List?

A. Close the Health Record.

B. Archive the Health Record but keep it active.

C. Destroy the Health Record.

D. Transfer to civilian personnel file.

When someone is retired or placed on Fleet Reserve, the active service Health Record is closed. This signals that the member is no longer in an active-duty status, so no new medical entries will be added to the active record. The record still exists and can be referenced for retirement benefits or future medical care, but it is no longer an active-duty file. Archiving or destroying would not reflect the need to retain the medical history for veterans' benefits and long-term care, and transferring it to a civilian personnel file isn't appropriate since the health record remains a military record managed for retention and later access.

6. Which step is essential to verify IV catheter patency after insertion?

A. Flush with normal saline and observe for flow

B. Use sterile technique

C. Leave the tourniquet in place

D. Tape the IV without securing

Patency means the IV catheter lumen is open and allows fluid to flow into the vein without obstruction. The essential step to verify this after insertion is to flush a small amount of normal saline through the catheter and observe for smooth, unimpeded flow into the vein. If the saline infuses readily and you see the expected flow, the catheter is patent and in the correct position. If you encounter resistance, no flow, or signs of infiltration, patency is not confirmed and the catheter should be reassessed. Sterile technique is always important to prevent infection, but it does not by itself verify whether the catheter is patent. The tourniquet is used during insertion to help visualize veins and is not needed to confirm patency afterward. Taping the IV without securing it handles securing the line, not patency.

7. Which action is part of the 3 checks of medication administration?

A. Verify the medication against the MAR at the bedside

B. Consult the doctor for every dose

C. Record only at the end of shift

D. Leave the medication at the nurse's station

Three checks are a safety routine used to catch medication errors before administration. The action described—verifying the medication against the MAR at the bedside—is the final bedside check performed right before giving the med. This moment ties together the patient's identity, the MAR details, and the medication label to confirm you have the exact drug, for the right patient, in the correct dose and by the proper route at the scheduled time. The other options don't fit this standard practice: consulting the doctor for every dose isn't part of the three checks, recording only at the end of the shift delays essential documentation, and leaving the medication at the nurse's station bypasses the crucial bedside verification and increases the risk of errors.

8. Who is responsible for carrying out medical surveillance duties within a medical department?

A. Administrative staff

B. External contractors

C. Only the on-duty nurse

D. Medical department personnel across the unit

Medical surveillance is a team effort within the medical department. It relies on the collective vigilance and documentation from all personnel who interact with patients and health data—physicians, nurses, HM personnel, and other unit staff. Each role contributes different information and perspectives, so relying on just one person (like the on-duty nurse) or outsourcing the task to external contractors would leave gaps in monitoring, reporting, and responding to health trends or potential hazards. Administrative staff handle records and logistics, but the ongoing monitoring and interpretation of health data come from the entire medical department team across the unit. In short, surveillance duties are shared by medical department personnel throughout the unit to ensure comprehensive and continuous health monitoring.

9. BUMEDINST 6440.5D governs which program?

A. Policy for sourcing and deploying Budget Submitting Office (BSO) 18 personnel to augment DoD joint staff, OPNAV HQ, HQMC, and USFF

B. Policy for credentialing medical staff

C. Policy for patient privacy rights

D. Policy for clinical training standards

The program described focuses on how budget and staffing support are organized at higher levels. Specifically, this instruction sets the policy for sourcing and deploying Budget Submitting Office-18 personnel who augment DoD joint staffs, OPNAV HQ, HQMC, and USFF with medical budgeting and staff support. These individuals help ensure medical planning, budgeting, and manpower oversight are integrated across the key commands, so medical strategy and resources align with operational needs. Other options don't fit this instruction because they concern different areas: credentialing medical staff is handled by separate credentialing policies; patient privacy rights fall under privacy and information-security provisions; and clinical training standards are governed by other training and readiness instructions.

10. Which items are included under administrative tools for AHLTA and CHCS?

A. Screening: hearing, hearing aid, dental, dental readiness, medical assessment.

B. Screening: hearing, hearing aid, dental readiness, patient satisfaction surveys

C. Qualifications: credentialing and privileging

D. Clinical decision support: coding guidelines

This question tests understanding of which items are tracked and managed as administrative tools within AHLTA and CHCS. The administrative tools are the data and functions used to monitor readiness and keep non-clinical records organized, such as screening data and readiness statuses. The best choice lists screening data elements that feed administrative oversight: hearing results and hearing aid management, dental screening and dental readiness, and medical assessment information. These items are exactly the kinds of data used to generate readiness reports, track administrative compliance, and support deployment and training decisions. The other options don't fit as administrative tools in these systems. Patient satisfaction surveys are more about quality improvement and service feedback rather than the administrative readiness functions these tools emphasize. Credentialing and privileging cover provider qualifications, not patient readiness data. Clinical decision support like coding guidelines belongs to the clinical and billing decision-support realm, not the administrative tracking of patient readiness data.

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://hmpqs.examzify.com

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