

JONES & BARTLETT LEARNING (JBL) MODULE 5 PRACTICE EXAM (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. Skeletal muscle is attached to the bone by tough, ropelike structures called which?**
 - A. Tendons
 - B. Ligaments
 - C. Cartilage
 - D. Fascia
- 2. Which factor increases the risk of fracture in an elderly fall?**
 - A. Osteoporosis
 - B. Age over 40
 - C. Daily activity
 - D. Balanced diet
- 3. Difficulty breathing and a sunken appearance of the anterior abdominal wall are most indicative of rupture of which organ?**
 - A. spleen.
 - B. aorta.
 - C. stomach.
 - D. diaphragm.
- 4. Which of the following is the ONLY action that can prevent eventual death from a tension pneumothorax?**
 - A. Decompression of the injured side of the chest
 - B. Rapid IV fluids
 - C. Bag-Valve Mask ventilation
 - D. High-flow oxygen
- 5. Which statement about secondary brain injury is correct?**
 - A. Signs are often present immediately after an impact to the head.
 - B. Hypoxia and hypotension are the two most common causes of secondary brain injury.
 - C. Because cerebral edema develops quickly, it is considered to be a primary brain injury.
 - D. It results from direct brain trauma following an impact to the head.

- 6. In a trauma patient with suspected spinal injury, which action is most important during initial assessment?**
- A. Remove the helmet to access the airway.
 - B. Start an IV line immediately.
 - C. Check blood glucose.
 - D. Stabilize the spine and prevent movement.
- 7. Which finding would most strongly suggest a renal injury after blunt abdominal trauma?**
- A. Abdominal distention
 - B. Flank hematoma
 - C. Dyspnea
 - D. Nausea
- 8. Which statement describes the reason for keeping protruding organs warm and moist in the field?**
- A. To reduce infection risk only
 - B. To prevent rapid cooling and tissue damage
 - C. To allow faster packaging
 - D. To avoid contamination
- 9. Which statement accurately describes the most common causes of secondary brain injury?**
- A. Occurs immediately after impact
 - B. Hypoxia and hypotension are major causes
 - C. Edema is a primary brain injury
 - D. Results from direct brain trauma only
- 10. Which term describes inadequate blood flow to meet cellular needs?**
- A. coagulation
 - B. hypoperfusion
 - C. hemorrhage
 - D. perfusion

Answers

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

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Explanations

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1. Skeletal muscle is attached to the bone by tough, ropelike structures called which?

- A. Tendons**
- B. Ligaments
- C. Cartilage
- D. Fascia

Muscle-to-bone attachments rely on tendons. Tendons are dense, rope-like strands of collagen-rich connective tissue that anchor skeletal muscles to bones. When a muscle contracts, the force is transmitted through the tendon to the bone, producing movement at the joint. Ligaments connect bone to bone and stabilize joints, not muscle to bone. Cartilage cushions and provides smooth surfaces in joints, and fascia surrounds muscles but doesn't directly attach them to bone. So the rope-like structures that attach skeletal muscle to bone are tendons.

2. Which factor increases the risk of fracture in an elderly fall?

- A. Osteoporosis**
- B. Age over 40
- C. Daily activity
- D. Balanced diet

The key idea is that bone strength determines whether a fall causes a fracture. Osteoporosis weakens bones by reducing bone mineral density and altering their microarchitecture, so even a low-energy fall can break them. In the elderly, this fragility makes fractures much more likely, especially in common sites like the hip, spine, and wrist. The other options don't fit as risk-increasing factors here. Simply being older than 40 isn't specific enough to predict fracture risk after a fall, and maintaining daily activity or a balanced diet helps protect bone health and reduce fracture risk rather than increase it.

3. Difficulty breathing and a sunken appearance of the anterior abdominal wall are most indicative of rupture of which organ?

- A. spleen.
- B. aorta.
- C. stomach.
- D. diaphragm.**

When the diaphragm ruptures, a hole opens between the chest and abdominal cavities. Abdominal organs can herniate into the thorax, which reduces lung expansion and leads to difficulty breathing. At the same time, much of the abdominal contents move upward, so the abdomen may look sunken or hollow. This combination of respiratory distress and a sunken anterior abdominal wall is characteristic of diaphragmatic rupture after trauma. Spleen rupture would cause bleeding and shock signs rather than primary breathing difficulty. Aorta rupture leads to sudden, overwhelming hemorrhage. Stomach rupture typically causes peritonitis rather than the chest–lung symptoms described.

4. Which of the following is the **ONLY** action that can prevent eventual death from a tension pneumothorax?

A. Decompression of the injured side of the chest

B. Rapid IV fluids

C. Bag-Valve Mask ventilation

D. High-flow oxygen

In tension pneumothorax, air builds up under pressure in the chest and pushes on the heart and great vessels, cutting off blood return to the heart. The only way to stop this deadly cycle is to relieve that pressure. Decompression of the injured side of the chest—such as needle thoracostomy followed by chest tube placement—immediately lets the trapped air escape, restores lung expansion, and improves venous return and cardiac output. Without relieving the pressure, other measures won't halt the progression to death, even if they improve oxygen levels or support circulation for a short time. High-flow oxygen helps with oxygenation, but it doesn't address the life-threatening pressure. Rapid IV fluids may temporarily support blood pressure but won't relieve the mechanical compression. Bag-valve-mask ventilation can raise intrathoracic pressure and worsen the condition.

5. Which statement about secondary brain injury is correct?

A. Signs are often present immediately after an impact to the head.

B. Hypoxia and hypotension are the two most common causes of secondary brain injury.

C. Because cerebral edema develops quickly, it is considered to be a primary brain injury.

D. It results from direct brain trauma following an impact to the head.

Secondary brain injury comes from the cascade of events that follow the initial head trauma, meaning the brain damage that occurs after the first impact as the body's response and the brain's own processes unfold. The statement that hypoxia (low oxygen) and hypotension (low blood pressure) are the two most common causes fits this idea because when the brain isn't getting enough oxygen or enough blood flow, it cannot meet its energy demands. This leads to neuronal injury and can worsen the outcome by expanding the initial damage. Other options don't capture this sequence. Signs of secondary injury aren't typically immediate; they often emerge as the cascade progresses over minutes to hours. Cerebral edema is part of the secondary process, not something that defines primary injury—the initial impact is the primary injury, while edema develops afterward and can worsen secondary injury. And secondary injury does not arise from direct brain trauma alone; that direct damage is the primary injury caused by the impact itself.

6. In a trauma patient with suspected spinal injury, which action is most important during initial assessment?

- A. Remove the helmet to access the airway.
- B. Start an IV line immediately.
- C. Check blood glucose.

D. Stabilize the spine and prevent movement.

Protecting the spine by preventing movement is the key priority when a trauma patient may have a spinal injury. Any movement can worsen a fracture and escalate a potentially devastating spinal cord injury, so you maintain in-line stabilization, keep the neck immobilized with a cervical collar, and secure the patient to a backboard during assessment and transport. This stabilizing step allows you to address airway and breathing with precautions while minimizing the risk of causing further harm to the spine. The decision to remove a helmet is situational and generally avoided unless it's necessary to manage the airway or perform life-saving procedures, and done with careful technique by trained personnel because removing it can cause neck movement. While establishing an IV or checking glucose are important in trauma care, they don't tackle the immediate risk of secondary spinal injury. The most important action is to stabilize the spine and prevent movement.

7. Which finding would most strongly suggest a renal injury after blunt abdominal trauma?

- A. Abdominal distention
- B. Flank hematoma**
- C. Dyspnea
- D. Nausea

The key idea is recognizing signs that point to bleeding from a retroperitoneal organ, like the kidneys, after blunt trauma. The kidneys lie behind the peritoneum, so bleeding from a renal injury often shows up as bruising in the flank area. A flank hematoma directly indicates retroperitoneal blood loss near the kidneys, making renal injury the most likely among the options. Other signs listed are non-specific. Abdominal distention can come from many causes, not just kidney injury. Dyspnea and nausea are general symptoms that don't specifically alert you to renal damage. While hematuria would also support a renal injury, the flank hematoma is the strongest clue from this set.

8. Which statement describes the reason for keeping protruding organs warm and moist in the field?

- A. To reduce infection risk only
- B. To prevent rapid cooling and tissue damage**
- C. To allow faster packaging
- D. To avoid contamination

Preserving tissue viability by preventing rapid cooling and drying of protruding organs. Exposed tissue loses heat quickly and moisture evaporates, which can cause cell injury and tissue death. Keeping the organs warm and moist slows these processes, helping maintain viability until definitive care can be provided. While infection control matters, the primary reason here is preventing rapid cooling and tissue damage. In field care, cover the protruding organs with sterile, moist dressings and avoid letting them dry, then seek urgent medical help.

9. Which statement accurately describes the most common causes of secondary brain injury?

- A. Occurs immediately after impact
- B. Hypoxia and hypotension are major causes**
- C. Edema is a primary brain injury
- D. Results from direct brain trauma only

Secondary brain injury is the cascade of processes that worsen brain damage after the initial trauma. The most common culprits are hypoxia and hypotension because when oxygen delivery or cerebral perfusion drops, neurons that survived the primary insult can still die from ischemia. Keeping the airway open, ensuring adequate breathing, and maintaining adequate blood pressure are crucial to prevent this secondary damage and minimize further brain injury. The other statements don't fit because the damage occurring at the moment of impact is the primary injury, not secondary. Edema develops as part of the secondary process and contributes to worsening injury, rather than being a primary event. And secondary injury can arise from systemic factors affecting the brain, not solely from direct brain trauma.

10. Which term describes inadequate blood flow to meet cellular needs?

- A. coagulation
- B. hypoperfusion
- C. hemorrhage
- D. perfusion**

The main idea here is tissue blood-flow terminology. Perfusion describes the flow of blood to tissues; when that flow is adequate, cells receive enough oxygen and nutrients. When the supply falls short of what cells need, it's hypoperfusion. This insufficiency can lead to cellular hypoxia and metabolic problems. Coagulation is clotting, and hemorrhage is bleeding—neither describes the state of insufficient blood flow. So the term that fits the description is hypoperfusion.

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://jblmodule5.examzify.com>

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

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