

LIFESAVING SOCIETY STANDARD FIRST AID (SFA) 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. What is a recommended approach to counter the bystander effect?**
 - A. Issue a loud call to a single person directly
 - B. Shout for everyone to help
 - C. Do nothing and wait
 - D. Leave the scene
- 2. Which technique should not be used for fractures/dislocations?**
 - A. Unconscious victim carried
 - B. A conscious victim who can't walk but needs to move quickly
 - C. A walking victim with minor injury
 - D. A child who can walk but prefers to be carried
- 3. Which action is part of fainting treatment guidance?**
 - A. EMS
 - B. Shock
 - C. Recommend med attention
 - D. Identify and control cause of fainting
- 4. For a wound with external bleeding, what is the first step you should take?**
 - A. Direct pressure
 - B. Elevate limb only
 - C. Check distal circulation only after bleeding stops
 - D. Apply ice directly to wound
- 5. During a seizure, which action is important to document?**
 - A. Move the person to a safe place
 - B. Put something between the teeth
 - C. Record number and duration of seizures
 - D. Restrain the person
- 6. Which of the following is one of the five rights of medicine administration?**
 - A. Right color
 - B. Right texture
 - C. Right dose
 - D. Right flavor

7. Mask squeeze may cause?

- A. Eyes bloodshot and distinctive outline of mask on face
- B. Distinctive outline of mask on face only
- C. Eardrum rupture
- D. Skin tingling

8. What does diabetes mean?

- A. Blood sugar levels are always stable
- B. The body produces insulin normally
- C. The body can regulate blood sugar
- D. The body can't regulate blood sugar

9. Which statement is correct regarding leech bites?

- A. Do NOT pull off
- B. Detach with salt, heat, or drop of kerosine to body
- C. Clean area with paste of baking soda + water or weak ammonia
- D. Medical attention if see infection

10. During the secondary assessment, what should be done after collecting CHAMPLE items?

- A. Move patient to a safe location
- B. Vitals and head-to-toe search afterwards
- C. Ask for consent before anything else
- D. Administer pain relief if possible

Answers

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

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Explanations

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1. What is a recommended approach to counter the bystander effect?

- A. Issue a loud call to a single person directly
- B. Shout for everyone to help
- C. Do nothing and wait
- D. Leave the scene

When several people are present, diffusion of responsibility can keep everyone from acting. The most effective way to counter this is to direct a specific person to help and tell them exactly what to do. By addressing one person directly, you remove the ambiguity of who should act and create accountability, which increases the likelihood that action will be taken promptly. For example, you might say to one bystander, "You call emergency services now," or "You bring the AED over here." Merely shouting that everyone should help leaves the task open-ended, and people may assume someone else will step in. Doing nothing or leaving the scene is never appropriate in an emergency. So, the best approach is to assign a concrete role to a particular person and proceed with those actions.

2. Which technique should not be used for fractures/dislocations?

- A. Unconscious victim carried
- B. A conscious victim who can't walk but needs to move quickly
- C. A walking victim with minor injury
- D. A child who can walk but prefers to be carried

Minimize movement to protect the spine when a fracture or dislocation is suspected. The approach that should not be used with an unconscious victim is carrying them because you cannot protect the spine or the airway. An unconscious person may have a spinal injury, and moving them by carrying can worsen spinal damage or block the airway. Instead, first ensure the airway and breathing are assessed and stabilized (use a jaw-thrust if a spinal injury is suspected), call for help, and immobilize the spine. If you must move the person for safety, do so with spinal precautions (for example, a log-roll with the head and neck stabilized or onto a long spine board) to keep the spine in alignment. The other scenarios can be managed in ways that limit movement and maintain spinal protection, depending on the situation.

3. Which action is part of fainting treatment guidance?

- A. EMS
- B. Shock
- C. Recommend med attention
- D. Identify and control cause of fainting

Fainting treatment guidance centers on finding and addressing the underlying cause. The best action is to identify and control the cause of fainting because addressing the trigger directly helps prevent another episode and reduces risk. In practice, assess for reversible factors like dehydration, overheating, or low blood sugar, and take steps to correct them: have the person lie down, loosen restrictive clothing, and if there are no injuries, raise the legs and ensure the airway is open while monitoring breathing. Offer fluids or a small sugary snack only if the person is conscious and able to swallow. Seek emergency help if red flags appear (chest pain, trouble breathing, confusion, injury from a fall, or if the person does not regain consciousness promptly). While EMS is important in certain situations, the overall guidance emphasizes identifying and controlling the cause rather than applying a generic action.

4. For a wound with external bleeding, what is the first step you should take?

- A. Direct pressure**
- B. Elevate limb only
- C. Check distal circulation only after bleeding stops
- D. Apply ice directly to wound

Direct pressure on the wound with a clean dressing is the first action to control external bleeding. Pressing firmly compresses the injured vessels and helps form a clot, which stops or slows the bleed. If blood soaks through, don't remove the initial dressing—add more layers on top and continue applying pressure. Elevating the limb can help but shouldn't delay applying pressure, and it's not a substitute for it. Distal circulation should be checked and monitored during care, not waited on until the bleeding stops. Ice directly on the wound isn't used to stop bleeding and should be avoided on the wound itself; cold is sometimes used later with a barrier if needed, after bleeding is controlled.

5. During a seizure, which action is important to document?

- A. Move the person to a safe place
- B. Put something between the teeth
- C. Record number and duration of seizures**
- D. Restrain the person

Documenting seizure activity by recording how many seizures occur and how long each one lasts provides crucial information for ongoing care. Knowing the duration helps identify potential escalation, such as status epilepticus, where seizures continue or follow one another without recovery for several minutes, which signals a need for emergency medical help. Tracking how often seizures occur also helps clinicians understand the pattern and effectiveness of any treatments or medications the person uses. While you keep the person safe during a seizure and arrange for care after it ends, the most important action for you during the event is to note the timing and frequency, since this information directly informs medical decisions and monitoring.

6. Which of the following is one of the five rights of medicine administration?

- A. Right color
- B. Right texture
- C. Right dose**
- D. Right flavor

The essential idea here is that safe medicine administration relies on the five rights: right patient, right drug, right dose, right time, and right route. The best answer is the right dose because giving the correct amount is crucial to ensure the medicine works as intended without causing harm. If the dose is too low, the medicine may not have a therapeutic effect; if it's too high, it can cause toxicity or adverse effects. Dosing depends on factors like age, weight, and the specific situation, so clinicians and responders take care to verify the order or label and perform the necessary calculations accurately. Color, texture, and flavor aren't part of the standard safety checks used to confirm you're giving the right medicine and in the right amount, so they don't serve the same purpose in the five rights.

7. Mask squeeze may cause?

- A. Eyes bloodshot and distinctive outline of mask on face
- B. Distinctive outline of mask on face only
- C. Eardrum rupture
- D. Skin tingling

Mask squeeze is a facial barotrauma from the pressure change squeezing the air space in the mask against the face. As pressure increases, the air in the mask compresses and pushes on the tissues around the eyes, often causing the eyes to become red from capillary rupture. The sustained pressure can also leave a noticeable imprint or outline of the mask on the face. These two signs together are the classic presentation of mask squeeze, which is why they're the best answer. Ear-related injury like an eardrum rupture is a different type of barotrauma tied to the ears, and skin tingling alone isn't specific to mask squeeze.

8. What does diabetes mean?

- A. Blood sugar levels are always stable
- B. The body produces insulin normally
- C. The body can regulate blood sugar
- D. The body can't regulate blood sugar

Diabetes means the body's system for keeping blood sugar in a normal range isn't working properly. Normally, insulin helps move glucose from the blood into cells to be used for energy. When there isn't enough insulin, or the body's cells don't respond to insulin, blood glucose stays high and this regulation fails. So the idea that the body can't regulate blood sugar describes what diabetes is. The other statements aren't correct because blood sugar levels aren't always stable in diabetes, insulin production isn't always normal (it can be reduced or ineffective depending on the type), and the body can regulate blood sugar only in healthy situations, not in diabetes.

9. Which statement is correct regarding leech bites?

- A. Do NOT pull off
- B. Detach with salt, heat, or drop of kerosine to body
- C. Clean area with paste of baking soda + water or weak ammonia
- D. Medical attention if see infection

Leeches cling by suction and release an anticoagulant in their saliva, so bleeding can continue for a while after they detach. Pulling a leech off can tear its mouthparts and leave them embedded in the skin, which can keep the wound bleeding longer and increase the risk of infection. The safer approach is not to yank it away. Instead, gently encourage detachment by sliding a flat edge or your fingernail under the leech to break suction, or use a small amount of salt or warm water to irritate the leech so it releases. Once it's gone, clean the area, apply direct pressure to control any bleeding, and monitor for infection. Seek medical attention if you notice signs of infection such as redness spreading, increased warmth, swelling, pus, or fever.

10. During the secondary assessment, what should be done after collecting CHAMPLE items?

- A. Move patient to a safe location
- B. Vitals and head-to-toe search afterwards**
- C. Ask for consent before anything else
- D. Administer pain relief if possible

After collecting CHAMPLE items during the secondary assessment, you should take vital signs and perform a head-to-toe examination. Vital signs give objective data on the patient's status (heart rate, breathing, blood pressure, consciousness, etc.), while the head-to-toe check systematically looks for injuries that aren't immediately apparent or reported. CHAMPLE helps you gather history and current symptoms, but without current vitals and a thorough physical exam you may miss evolving problems or hidden injuries. Moving the patient to a new location isn't the immediate next step unless scene safety requires it, and consent is important but is not a substitute for completing the physical assessment; pain relief isn't automatically administered without first assessing and confirming indications per protocol.

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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://lifesavingsfa.examzify.com>

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

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