

Mosby Protection-Safety 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 elements are included in a fall incident report?**
 - A. Time and weather conditions**
 - B. Time, location, activity, injuries, witnesses, immediate actions, and follow-up**
 - C. Only location and patient name**
 - D. Diagnosis and treatment plan**

- 2. The ability of different types of radiation to produce the same biological response in an organism is called:**
 - A. LET**
 - B. WR**
 - C. RBE**
 - D. Doubling dose**

- 3. Which includes filters for measurement of radiation energy?**
 - A. Handheld ionization chamber**
 - B. Film badge**
 - C. TLD**
 - D. OSL**

- 4. How should you manage a chemical spill involving a toxic substance?**
 - A. Evacuate if needed, alert others, use spill kit with PPE, contain and dispose per SDS**
 - B. Open windows, ignore PPE**
 - C. Pour water to rinse; no PPE**
 - D. Use bleach to neutralize**

- 5. The timer used in fluoroscopy:**
 - A. Should always be reset before the alarm sounds so that it does not annoy the radiologist**
 - B. Sounds an alarm after 3 minutes**
 - C. Is used to alert the fluoroscopist after 5 minutes of fluoroscopy scanning have elapsed**
 - D. Must be 3 minutes**

- 6. Gya is the unit for Gray in air. What does it describe?**
- A. Gray in air**
 - B. Gray in tissue**
 - C. Dose equivalent in Sv**
 - D. Absorbed dose in tissue**
- 7. Which device can read doses as low as 50 μ Gya?**
- A. Handheld ionization chamber**
 - B. TLD**
 - C. Pocket ionization chamber**
 - D. Film badge**
- 8. How should you store oxygen in a healthcare setting?**
- A. Upright, Secured, Away From Heat And Ignition Sources, With No Petroleum Products Nearby**
 - B. Lying On The Floor Near Petroleum Products**
 - C. In A Closed Cabinet Near Heat**
 - D. Exposed To Direct Sunlight**
- 9. Why is indirect effect more likely to cause cell damage?**
- A. Because the nucleus is larger**
 - B. Because mitochondria are more sensitive**
 - C. Because the cytoplasm is larger**
 - D. Because the cell membrane absorbs more energy**
- 10. Which of the following is also known as coherent scattering?**
- A. Photoelectric interaction**
 - B. Compton interaction**
 - C. Classical scatter**
 - D. Pair production**

Answers

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

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Explanations

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1. Which elements are included in a fall incident report?

- A. Time and weather conditions
- B. Time, location, activity, injuries, witnesses, immediate actions, and follow-up**
- C. Only location and patient name
- D. Diagnosis and treatment plan

The main idea is to capture a complete, actionable record of the incident so it can be analyzed and preventive steps put in place. A proper fall incident report should document when the fall happened, where it occurred, what the person was doing at the time, what injuries were observed, who witnessed the fall, the actions taken immediately (such as first aid or calling for help), and the planned follow-up (medical evaluation, referrals, monitoring, and preventive measures). This full set of details creates a clear picture of the event and supports both immediate care and future safety improvements. Why other options don't fit: listing only time and weather leaves out crucial context about what happened and the outcomes. Documenting only location and patient name omits the activity, injuries, witnesses, immediate response, and follow-up, which are essential for understanding and preventing recurrence. Putting a diagnosis and treatment plan in an incident report shifts focus to clinical care details rather than the event itself, which shortchanges the purpose of incident reporting.

2. The ability of different types of radiation to produce the same biological response in an organism is called:

- A. LET
- B. WR
- C. RBE**
- D. Doubling dose

The key idea here is Relative Biological Effectiveness. RBE measures how different types of radiation compare in their ability to produce the same biological effect. It's defined as the dose of a reference radiation needed to achieve a given effect divided by the dose of the radiation being tested that produces the same effect. If a different radiation can achieve that effect with a smaller dose, it has a higher RBE. This concept helps explain why some radiations, especially higher-LET ones, can be more biologically damaging per unit dose than others. LET describes how densely energy is deposited along the particle's path, and while higher LET often leads to more complex, damaging DNA, RBE specifically focuses on the dose needed to reach the same endpoint, and it can vary depending on the endpoint, dose, and biological system. The other terms don't capture this comparative efficiency in producing a biological response. LET is about energy deposition, not the comparative dose needed for the same effect. A weighting or quality factor used for protection calculations isn't a direct measure of equivalence of biological effect between radiations. The doubling dose is a genetic concept about how much dose increases mutation frequency, not about comparing overall biological responses across radiation types.

3. Which includes filters for measurement of radiation energy?

- A. Handheld ionization chamber
- B. Film badge**
- C. TLD
- D. OSL

Filters are used to reveal the energy of incoming radiation because a detector's response changes with photon energy, and filters selectively attenuate different energies. A film badge is designed with a film element plus a set of filters of varying materials and thicknesses. When the badge is exposed, the film darkens in a way that depends on both the dose and the energy of the photons. By reading the film through each filter and comparing the resulting densities, you can infer the radiation's energy and adjust the dose reading accordingly. This explicit use of multiple filters to determine energy is what makes the film badge the best choice for measuring radiation energy. Handheld ionization chambers provide real-time dose readings with less emphasis on energy discrimination, while TLD and OSL dosimeters can be used with filters but are not as inherently energy-monitoring in the standard setup as the film badge.

4. How should you manage a chemical spill involving a toxic substance?

- A. Evacuate if needed, alert others, use spill kit with PPE, contain and dispose per SDS**
- B. Open windows, ignore PPE
- C. Pour water to rinse; no PPE
- D. Use bleach to neutralize

When a toxic chemical spill happens, the first priority is safety and containment. Start by getting people away from the area if exposure is possible and alert others so the scene can be secured and responders can be directed. Then bring in the spill kit and put on the proper PPE for the substance—this usually means chemical-resistant gloves, eye protection or a face shield, a protective coat or apron, and respiratory protection if fumes are present. The PPE isn't optional; it's what keeps skin, eyes, and lungs from being damaged as you handle the spill. Containment is the next crucial step. Use absorbent materials and barriers from the spill kit to stop the liquid from spreading to drains, waterways, or other areas, and to prevent the vapor from dispersing further. After safely containing the material, disposal follows exactly what the Safety Data Sheet requires. The SDS tells you how to classify the waste, how to label and store it, and the approved method for cleanup and disposal, often involving proper hazardous-waste containers and organized pickup by qualified personnel. This structured approach minimizes exposure, environmental impact, and chemical reactions during cleanup. Amid all that, avoid actions that can worsen the situation. Opening windows without guidance can spread dangerous vapors; pouring water to rinse a spill can spread the substance or cause unintended reactions; ignoring PPE removes the essential barrier against exposure; and attempting to neutralize with bleach can release toxic gases or trigger hazardous chemical reactions. Sticking to PPE, containment, and SDS-guided disposal ensures the cleanup is handled safely and correctly.

5. The timer used in fluoroscopy:

- A. Should always be reset before the alarm sounds so that it does not annoy the radiologist**
- B. Sounds an alarm after 3 minutes**
- C. Is used to alert the fluoroscopist after 5 minutes of fluoroscopy scanning have elapsed**
- D. Must be 3 minutes**

In fluoroscopy, keeping track of how long the X-ray beam has been on is essential to limit radiation exposure. The timer on the fluoroscope serves as a safety reminder, typically sounding an audible alert after five minutes of continuous fluoroscopy. This prompts the fluoroscopist to pause, reduce dose, reposition, or switch to still imaging as needed, helping to adhere to ALARA principles. Resetting the timer before the alarm defeats this safety check, and a three-minute alert isn't the standard practice, since five minutes provides a practical balance between procedural needs and dose control.

6. Gya is the unit for Gray in air. What does it describe?

- A. Gray in air**
- B. Gray in tissue**
- C. Dose equivalent in Sv**
- D. Absorbed dose in tissue**

The main idea here is absorbed dose—the energy from radiation deposited per unit mass. The gray is the unit for that dose. When we see Gya, Gray in air, it means the absorbed dose is being described for air itself, not for tissue. So it tells you how much energy was deposited per kilogram of air by the radiation. This is used in dosimetry and detector calibration because measurements are often referenced to air conditions. It's different from Gray in tissue (absorb dose in tissue) and from dose equivalent in sieverts (which weighs the dose by biological effect). It's also distinct from simply absorbed dose in tissue, which would be described as Gy in tissue. For example, if 1 joule of energy is deposited in 1 kilogram of air, that corresponds to 1 Gy in air.

7. Which device can read doses as low as 50 μ Gya?

- A. Handheld ionization chamber**
- B. TLD**
- C. Pocket ionization chamber**
- D. Film badge**

High-sensitivity dose measurement requires a dosimeter that can detect tiny energy deposits in the detector material. Thermoluminescent dosimeters trap energy when exposed and later release light when heated; the light output is proportional to the absorbed dose, giving precise readings even at very low exposures. This makes them capable of reading doses around 50 μ Gy in air. In contrast, handheld or pocket ionization chambers are designed for real-time dose-rate monitoring and generally require higher accumulated doses to produce precise readings; their signals can be less reliable at very low total exposures. Film badges can measure dose as well, but their sensitivity is lower and their readings rely on processing and calibration, which can obscure very small doses like 50 μ Gy. So, the thermoluminescent dosimeter is the best choice for detecting such a low dose because of its superior sensitivity at the μ Gy level.

8. How should you store oxygen in a healthcare setting?

- A. Upright, Secured, Away From Heat And Ignition Sources, With No Petroleum Products Nearby
- B. Lying On The Floor Near Petroleum Products**
- C. In A Closed Cabinet Near Heat
- D. Exposed To Direct Sunlight

Oxygen storage is about preventing fuel-ready conditions around the gas. Oxygen itself doesn't burn, but it makes flames burn much more vigorously, and higher concentrations can dramatically accelerate fires. To keep it safe, cylinders should be kept upright and securely fastened so they can't tip over. They must be kept away from heat sources and any ignition sources, as heat raises cylinder pressure and can weaken seals or cause leaks. Also keep them away from flammable liquids like petroleum products because a leak near those substances greatly increases fire risk. Direct sunlight should be avoided, since it can heat the cylinder and raise internal pressure. Storing oxygen in a well-ventilated area, secured and free from flammable liquids, is the best practice.

9. Why is indirect effect more likely to cause cell damage?

- A. Because the nucleus is larger
- B. Because mitochondria are more sensitive
- C. Because the cytoplasm is larger**
- D. Because the cell membrane absorbs more energy

Indirect damage from radiation comes from radiolysis of water inside the cell, producing free radicals that diffuse and attack vital biomolecules. Most of a cell's water—and thus the site for radical production—resides in the cytoplasm. If the cytoplasm is larger, there is more water available to be hit, creating more free radicals and increasing the chance that these radicals damage critical targets like DNA and membranes. The nucleus isn't the source of the radicals here; it's the abundant cytoplasmic water that drives the indirect effect. Mitochondria's sensitivity and the cell membrane's energy absorption aren't the primary drivers of this indirect pathway, so they don't explain why a larger cytoplasm leads to more indirect damage.

10. Which of the following is also known as coherent scattering?

- A. Photoelectric interaction
- B. Compton interaction
- C. Classical scatter**
- D. Pair production

Coherent scattering is elastic scattering of photons by an atom, where the photon keeps essentially the same energy and the atom remains in its ground state. This is also described by classical wave theory, since the whole atom scatters the wave without transferring energy to the electrons, so it's often called classical (or Rayleigh) scattering. The key point is that no ionization or energy transfer occurs and the phase of the wave is preserved, leading to scattering at small angles. In contrast, the other interactions involve energy transfer or absorption: the photoelectric effect absorbs the photon and ejects an electron; Compton scattering transfers part of the energy to a recoil electron, changing the photon's energy and wavelength; pair production requires more energy than the photon has to create an electron-positron pair.

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://mosbyprotsafety.examzify.com>

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

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