

NHCO Phlebotomy 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. The term 'atria' refers to which part of the heart?**
 - A. Lower chambers**
 - B. Heart valves**
 - C. Upper chambers**
 - D. Blood vessels**

- 2. Vehicle transmission is best described as transmission where the agent is contained in a fluid that the host comes in contact with.**
 - A. Direct contact**
 - B. Airborne inhalation**
 - C. Agent contains fluid on surfaces**
 - D. Vector-borne**

- 3. Which cells contain hemoglobin?**
 - A. Erythrocytes**
 - B. Leukocytes**
 - C. Thrombocytes**
 - D. Plasma**

- 4. If an ABG sample cannot be analyzed immediately, which storage/handling practice is recommended?**
 - A. Store at 37°C**
 - B. Leave at room temperature in a bag**
 - C. Freeze at -20°C**
 - D. Place on ice and shield from air, analyze promptly**

- 5. Where is the radial artery located for arterial blood gas draws?**
 - A. In the neck**
 - B. In the elbow crease**
 - C. In the groin**
 - D. On the wrist (thumb side)**

- 6. Which blood collection method is most commonly used?**
- A. Evacuated tube method**
 - B. Syringe method**
 - C. Butterfly method**
 - D. Capillary method**
- 7. A complaint inspection is triggered by what event?**
- A. Fatality/Accident**
 - B. Programmed**
 - C. Imminent Danger**
 - D. Complaint**
- 8. When a mistake occurs, to whom should the phlebotomist report?**
- A. Doctor**
 - B. Patient**
 - C. Supervisor**
 - D. Peer**
- 9. Programmed inspections occur how and in what settings?**
- A. Occur yearly at random in hazardous workplaces**
 - B. Triggered by a complaint**
 - C. Initiated by employer notice**
 - D. Triggered by imminent danger**
- 10. Where should the tourniquet be placed during venipuncture?**
- A. Directly over the draw site**
 - B. Below the draw site**
 - C. On the wrist**
 - D. 3-4 inches above the draw site**

Answers

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

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Explanations

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1. The term 'atria' refers to which part of the heart?

- A. Lower chambers
- B. Heart valves
- C. Upper chambers**
- D. Blood vessels

The main concept here is the heart's chamber roles. The atria are the two upper chambers and their job is to receive blood before it moves into the ventricles. The right atrium collects deoxygenated blood from the body through the superior and inferior vena cavae, while the left atrium receives oxygenated blood from the lungs via the pulmonary veins. From the atria, blood passes into the lower chambers, the ventricles, which then pump it out to the lungs or the rest of the body. Valves sit between the atria and ventricles, and blood vessels are outside the heart, carrying blood to or from it. So the term in question refers to the upper chambers of the heart.

2. Vehicle transmission is best described as transmission where the agent is contained in a fluid that the host comes in contact with.

- A. Direct contact
- B. Airborne inhalation
- C. Agent contains fluid on surfaces**
- D. Vector-borne

Vehicle transmission happens when a pathogen is carried by a contaminated fluid or other substance that the person then encounters or uses. In this case, the agent is inside a fluid and the host comes into contact with that fluid. That makes it a vehicle (common-source) transmission, where the fluid acts as the carrier linking exposure to the source rather than spreading directly from person to person, through the air, or via a living creature. Direct contact would require touching an infected person or their bodily fluids directly. Airborne inhalation involves breathing in droplets or aerosols suspended in the air, not a liquid you touch. Transmission via contaminated surfaces (fomites) involves contact with a surface that harbors the agent, not a fluid that is ingested or touched. Vector-borne transmission requires a living carrier, like an insect, to transfer the pathogen. The fluid carrier description fits vehicle transmission most closely.

3. Which cells contain hemoglobin?

- A. Erythrocytes**
- B. Leukocytes
- C. Thrombocytes
- D. Plasma

Hemoglobin is the protein inside red blood cells that carries oxygen from the lungs to tissues and helps return carbon dioxide for exhalation. These cells, called erythrocytes, are specialized for this task and are packed with hemoglobin; plasma is the liquid component of blood and does not contain hemoglobin, while white blood cells (leukocytes) and platelets (thrombocytes) have other roles and do not carry significant amounts of hemoglobin.

4. If an ABG sample cannot be analyzed immediately, which storage/handling practice is recommended?

A. Store at 37°C

B. Leave at room temperature in a bag

C. Freeze at -20°C

D. Place on ice and shield from air, analyze promptly

Preserving an arterial blood gas sample after collection requires slowing metabolic activity and preventing gas diffusion. After collection, blood cells keep metabolizing, which alters oxygen and carbon dioxide levels and pH. Placing the sample on ice slows enzymatic activity and gas production/consumption, helping keep PaO₂, PaCO₂, and pH close to the patient's true values. Shielding the sample from air prevents gas exchange with the environment, preserving the blood's original gas tensions. Analyzing promptly then captures an accurate snapshot of the patient's status. Storing at body temperature would speed up changes in gas tensions and pH. Leaving the sample at room temperature in a bag allows ongoing metabolism and gas exchange with ambient air. Freezing would cause cellular damage and affect the integrity of the specimen, making results unreliable.

5. Where is the radial artery located for arterial blood gas draws?

A. In the neck

B. In the elbow crease

C. In the groin

D. On the wrist (thumb side)

The radial artery used for arterial blood gas draws is located at the wrist on the thumb side. This artery runs along the lateral aspect of the wrist, just beneath the skin, near the base of the thumb, making it accessible and relatively easy to palpate a strong pulse for puncture. Clinicians often verify adequate hand perfusion before puncture with an Allen test to ensure the ulnar and radial arteries both contribute to blood flow, reducing the risk of hand ischemia if one artery is compromised. The other sites referenced correspond to different arteries: the neck is where the carotid artery lies, the elbow crease is the brachial artery, and the groin is where the femoral artery runs.

6. Which blood collection method is most commonly used?

- A. Evacuated tube method**
- B. Syringe method**
- C. Butterfly method**
- D. Capillary method**

The main concept is efficient, safe, and standardized blood collection for routine testing. The evacuated tube method uses a vacutainer system with a double-point needle and pre-vacuum tubes to draw a precise volume of blood into each tube automatically. This creates a closed, sterile system, reducing the risk of needlestick injuries and contamination, while allowing multiple tubes to be collected in one venipuncture without repeated transfers. It also standardizes blood volumes for different tests by simply selecting the appropriate tubes, which helps ensure accurate results and reduces the need for reruns. Other methods—syringe, butterfly, and capillary—are used in special situations (difficult veins, small volumes, or field settings) but are slower, involve more handling, and increase opportunities for hemolysis or contamination, making them less common for routine venipuncture.

7. A complaint inspection is triggered by what event?

- A. Fatality/Accident**
- B. Programmed**
- C. Imminent Danger**
- D. Complaint**

A formal complaint filed by a worker, their representative, or the public alleging unsafe or unhealthy conditions triggers a complaint inspection. This type of inspection starts specifically because someone reported concerns that need to be investigated and addressed. Other inspections are started for different reasons—planned, scheduled inspections; imminent danger situations requiring rapid verification; and investigations after a fatality or serious accident.

8. When a mistake occurs, to whom should the phlebotomist report?

- A. Doctor**
- B. Patient**
- C. Supervisor**
- D. Peer**

In healthcare, handling mistakes follows a clear reporting path to protect patient safety and ensure proper follow-up. The phlebotomist should report the error to the supervisor because the supervisor is responsible for initiating the formal response, coordinating corrective actions, and ensuring the incident is documented in the quality assurance system. This keeps the process organized, triggers any required notifications to other care team members, and engages risk management if needed. While informing a physician may be necessary if patient care is affected, and communicating with the patient can be appropriate later, the supervisor is the designated first point for formal reporting and investigation. Peers may become informed through established QA channels, but the official report goes through the supervisor to maintain the proper chain of command and accountability.

9. Programmed inspections occur how and in what settings?

A. Occur yearly at random in hazardous workplaces

B. Triggered by a complaint

C. Initiated by employer notice

D. Triggered by imminent danger

Programmed inspections are planned, preventive checks conducted on a scheduled basis in worksites with higher risk. They are not reactive to a complaint or immediate danger, and they aren't initiated simply because an employer requests an inspection. Instead, the program targets hazardous workplaces and conducts inspections at regular intervals, often yearly, to ensure ongoing compliance in settings where the risk of violations is greatest. This proactive approach contrasts with complaint-driven investigations or imminent-danger responses, which are triggered by specific events or reports. That's why describing them as yearly, random inspections in hazardous workplaces best captures how programmed inspections operate.

10. Where should the tourniquet be placed during venipuncture?

A. Directly over the draw site

B. Below the draw site

C. On the wrist

D. 3-4 inches above the draw site

The main idea is that a tourniquet should create a localized pool of blood in the vein you'll puncture, without pressing directly on the draw site. Placing it three to four inches above the venipuncture site on the upper arm achieves this by distending the veins proximal to the puncture, making them easier to feel and see while keeping the draw area free for needle entry. If the tourniquet is placed directly over the draw site, it can compress the vein and hinder a clean puncture. If it's placed below the draw site, it may impede blood flow from the hand, causing unnecessary discomfort and potentially affecting test results due to altered venous conditions. A tourniquet on the wrist is less effective because wrist veins are smaller and more variable, making it harder to locate a good target vein. So, positioning the tourniquet about 3-4 inches above the draw site on the upper arm provides optimal vein visualization and a safer, more reliable venipuncture.

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://nhcophlebotomy.examzify.com>

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

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