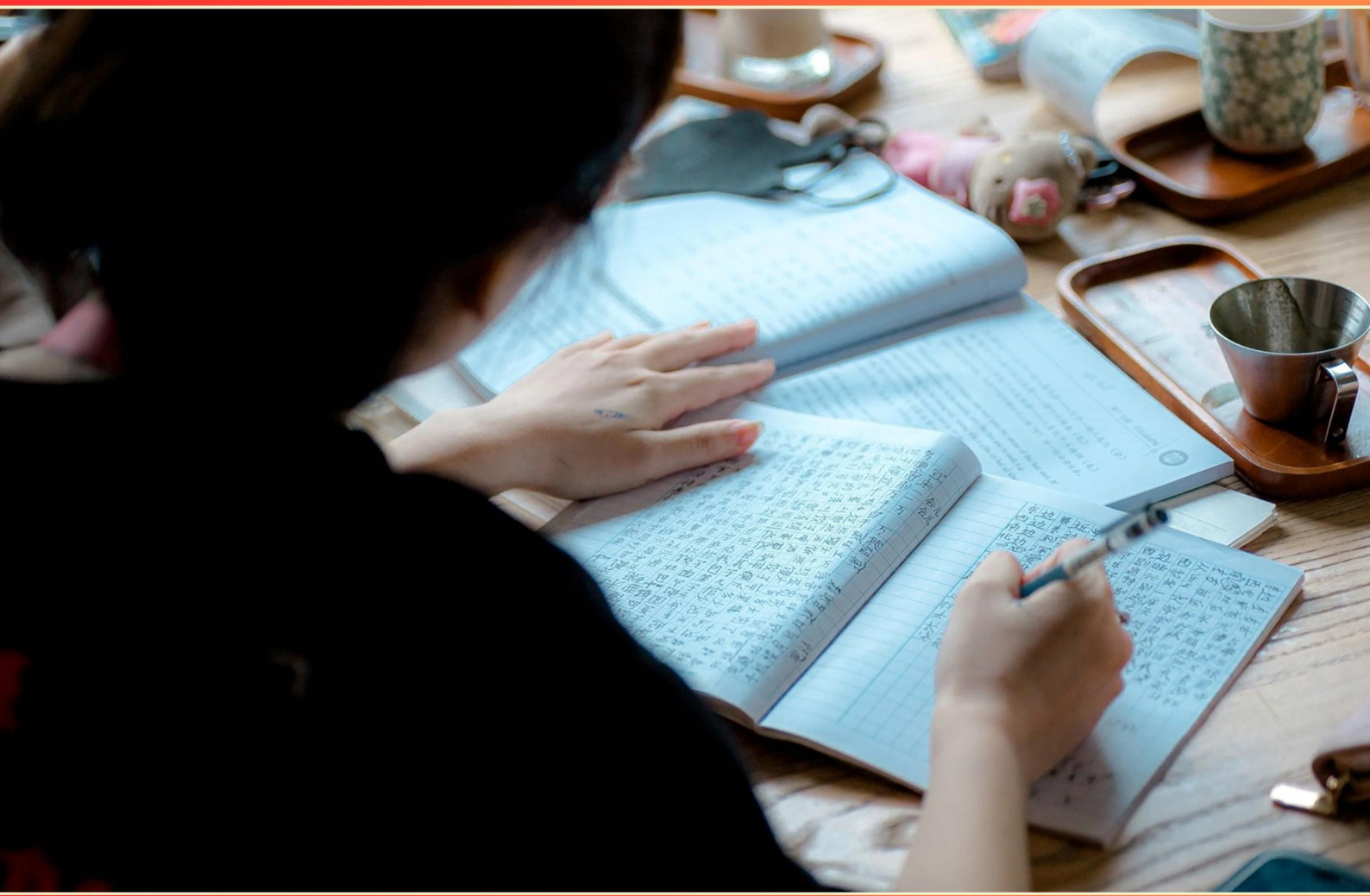
NHSA MODULE 5 PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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https://nhsamodule5.examzify.com

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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. Which action is involved in a Code Blue response?

A. Schedule a routine alarm check.

B. Perform a regular vitals check only.

C. Activate emergency response and initiate CPR and ACLS per protocol.

D. Transport patient to another ward.

2. What is the potential benefit to using high beams on curvy roads?

A. They make you more visible to other drivers

B. They reduce glare for oncoming traffic

C. They help you save fuel

D. You will be able to see potential obstacles and curves ahead

3. What is a Safety Data Sheet (SDS) and when must it be accessible in healthcare facilities?

A. Provides hazards and handling instructions for chemicals; accessible where chemicals are used

B. A document that lists patient records

C. An insurance form for chemical suppliers

D. A training manual for staff unrelated to chemicals

4. Before attempting a pass on a two-lane highway, you should check for oncoming vehicles.

A. There must be no oncoming traffic

B. If vehicles are approaching

C. The weather is clear

D. You have plenty of time

5. How long should hand hygiene last?

A. 10 seconds

B. 20 seconds

C. 30 seconds

D. 40 seconds

6. What is a 'safety walk' and how should it be conducted to maximize learning and engagement?

A. A management-only audit without staff involvement.

B. A guided tour to observe safety conditions; conducted with frontline staff, documenting findings and initiating rapid improvements.

C. A one-time event with no follow-up.

D. An informal chat unrelated to physical safety conditions.

7. What is the best practice for transferring a patient with limited mobility?

A. Use proper body mechanics and assistive devices (gait belt, transfer board) with a second caregiver as needed; lock wheels

B. Have the patient transfer themselves

C. Use only one caregiver

D. Avoid assistive devices

8. Which statement best describes the PASS technique for fire extinguishers?

A. Push the extinguisher toward the fire and spray.

B. Sweep from side to side using a light spray.

C. Pull the pin, Aim at the base of the fire, Squeeze the handle, Sweep from side to side.

D. Only call for help and do not attempt to extinguish.

9. Which right is essential to obtain before administering any treatment to a patient?

A. Informed consent from the patient (or legal representative)

B. Right to privacy

C. Right to refuse treatment

D. Right to schedule a second opinion

10. How should critical test results be communicated?

A. Announce results to all staff.

B. Post results on the unit whiteboard.

C. Directly to the ordering clinician or appropriate licensed professional promptly and documented.

D. Fax results to the patient without notifying the clinician.

Answers

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

Explanations

1. Which action is involved in a Code Blue response?

A. Schedule a routine alarm check.

B. Perform a regular vitals check only.

C. Activate emergency response and initiate CPR and ACLS per protocol.

D. Transport patient to another ward.

A Code Blue is a medical emergency signaling cardiac or respiratory arrest, so the action that fits best is to activate the emergency response and begin life-saving measures right away. Starting CPR immediately maintains blood flow to vital organs, and following ACLS per protocol provides the structured steps for advanced care, including rhythm assessment, defibrillation if indicated, airway management, and appropriate medications. This rapid, coordinated response gives the patient the best chance of returning to a survivable heartbeat. Scheduling routine alarm checks or only doing vitals won't address the urgent need for resuscitation and can waste precious seconds. Transporting the patient to another ward delays critical care, which is why it's not appropriate during a Code Blue.

2. What is the potential benefit to using high beams on curvy roads?

A. They make you more visible to other drivers

B. They reduce glare for oncoming traffic

C. They help you save fuel

D. You will be able to see potential obstacles and curves ahead

High beams on dark, unlit roads extend how far you can see, which is especially crucial on winding sections where visibility around bends is limited. The extra illumination helps you spot potential obstacles like animals, debris, or a sharp curve ahead sooner, giving you time to slow down and react safely. That anticipates hazards before you reach them, which is the main benefit on curvy roads. The other options aren't the primary purpose: high beams don't inherently make you more visible to others, they can create glare for oncoming drivers, and they don't save fuel. Use high beams when there's no oncoming traffic or vehicles ahead and switch to low beams when needed to avoid blinding others.

3. What is a Safety Data Sheet (SDS) and when must it be accessible in healthcare facilities?

A. Provides hazards and handling instructions for chemicals; accessible where chemicals are used

B. A document that lists patient records

C. An insurance form for chemical suppliers

D. A training manual for staff unrelated to chemicals

An SDS communicates the hazards of a chemical and how to handle it safely. It includes details like the chemical's identity, hazard classifications, first-aid measures, safe storage and handling, appropriate personal protective equipment, spill or exposure response, and stability and transport information. In healthcare facilities, these sheets must be readily accessible to staff in areas where chemicals are used or stored so they can quickly consult them during routine use or an emergency. This accessibility is why the option describing hazards and handling instructions and the need for access where chemicals are used is correct. The other options describe patient records, insurance forms, or generic training materials, none of which convey chemical hazards or safety procedures.

4. Before attempting a pass on a two-lane highway, you should check for oncoming vehicles.

A. There must be no oncoming traffic

B. If vehicles are approaching

C. The weather is clear

D. You have plenty of time

The essential idea is that passing on a two-lane highway must be done only after you've confirmed there's no oncoming traffic within a safe distance and you have enough time to complete the maneuver and return to your lane. The best option emphasizes actively checking whether vehicles are approaching; if there are approaching vehicles, you should not attempt the pass. Weather or time won't by themselves make passing safe, and even if conditions seem favorable, you still need a clear opposite-lane view and sufficient space to finish the pass before any oncoming vehicle arrives.

5. How long should hand hygiene last?

A. 10 seconds

B. 20 seconds

C. 30 seconds

D. 40 seconds

Thorough hand hygiene works because you need enough time for friction to lift and remove microbes from every part of the hands. A minimum of about twenty seconds of washing with soap and water gives enough contact with all surfaces—palms, backs of the hands, between fingers, and under the nails—to scrub away germs and rinse them away. Shorter times risk missing areas, while longer durations like thirty or forty seconds aren't necessary for routine use and are mainly used in special medical scrubs. When using an alcohol-based sanitizer, rub until the product dries, which typically takes about twenty seconds as well.

6. What is a 'safety walk' and how should it be conducted to maximize learning and engagement?

A. A management-only audit without staff involvement.

B. A guided tour to observe safety conditions; conducted with frontline staff, documenting findings and initiating rapid improvements.

C. A one-time event with no follow-up.

D. An informal chat unrelated to physical safety conditions.

A safety walk is a collaborative, on-the-ground check of safety conditions that brings frontline staff and leaders together to observe the actual work area, discuss hazards, and identify quick, learnable improvements. It's not just about spotting problems; it's about learning from how things happen day to day and turning observations into action that protects people. To maximize learning and engagement, the walk should be guided and include the people who know the work best. Frontline staff participate alongside supervisors or safety leads, using a straightforward checklist or route to focus on real conditions, behaviors, and potential hazards. Findings are documented—things like notes, photos, or observations—that can be reviewed with the team. The emphasis is on rapid improvements, so clear owner assignment and a near-term timeline for corrective actions are established, with a follow-up or re-walk to verify that fixes were put in place. The atmosphere should be curious and non-punitive, inviting ideas and suggestions from those doing the work. This approach aligns with the description of a safety walk that involves frontline staff, records findings, and drives rapid improvements. It avoids the pitfalls of a management-only audit, a one-time event with no follow-up, or an informal chat unrelated to safety.

7. What is the best practice for transferring a patient with limited mobility?

A. Use proper body mechanics and assistive devices (gait belt, transfer board) with a second caregiver as needed; lock wheels

B. Have the patient transfer themselves

C. Use only one caregiver

D. Avoid assistive devices

Safe transfers rely on good body mechanics, the right assistive devices, and help when needed to control the move. Keep the back straight, bend at the hips and knees, bring the patient close to you, and avoid twisting while you shift. Use a gait belt to secure the patient and a transfer board or slide sheet to bridge surfaces when appropriate, so the move is supported and controlled. Having a second caregiver allows one person to guide and stabilize the patient while the other manages the transfer, coordinating steps and ensuring balance. Always lock wheels on the bed and chair and position surfaces at compatible heights to create a stable base. If the patient is very weak or unsteady, rely on assistive devices and careful manual technique rather than attempting the transfer alone.

8. Which statement best describes the PASS technique for fire extinguishers?

A. Push the extinguisher toward the fire and spray.

B. Sweep from side to side using a light spray.

C. Pull the pin, Aim at the base of the fire, Squeeze the handle, Sweep from side to side.

D. Only call for help and do not attempt to extinguish.

The technique tested focuses on the proper way to operate a fire extinguisher in four steps that directly attack the fire. First, pull the pin to break the tamper seal and prepare the extinguisher to discharge. Then, aim the nozzle at the base of the fire, not at the flames, so you target the fuel source. Next, squeeze the handle to release the extinguishing agent. Finally, sweep the nozzle from side to side at the base of the fire to cover the area and push the fire back until it's out. This sequence ensures you control the discharge, reach the fuel source, and sweep the entire area to extinguish it. Pushing the extinguisher toward the fire and spraying isn't correct because the goal is to hit the base, where the fuel is, not chase the flames. Using a light spray doesn't provide enough agent or coverage to reliably knock down the fire. And waiting for others to respond without attempting the proper steps misses the opportunity to control a small fire early, if it's safe to do so.

9. Which right is essential to obtain before administering any treatment to a patient?

A. Informed consent from the patient (or legal representative)

B. Right to privacy

C. Right to refuse treatment

D. Right to schedule a second opinion

Respecting patient autonomy means you can't start treatment without the patient's understanding and voluntary agreement. Informed consent involves explaining the diagnosis, the proposed treatment and its purpose, potential risks and benefits, alternatives (including no treatment), and likely outcomes, then obtaining a voluntary agreement from the patient or their legally authorized representative. This process ensures the patient has the information and freedom to decide what happens to their body, which is the ethical and legal foundation for care. The right to privacy protects confidentiality but doesn't authorize treatment. The right to refuse treatment is encompassed within the consent framework—patients can decline care, and those decisions must be respected. Scheduling a second opinion is a helpful option but not a prerequisite for initiating treatment.

10. How should critical test results be communicated?

A. Announce results to all staff.

B. Post results on the unit whiteboard.

C. Directly to the ordering clinician or appropriate licensed professional promptly and documented.

D. Fax results to the patient without notifying the clinician.

Critical test results require immediate action by the person who can interpret and act on them. The best practice is to notify the ordering clinician or another appropriate licensed professional directly and promptly, with documentation in the medical record. This ensures the result is interpreted in the correct clinical context, urgent next steps can be taken without delay, and there is a clear, verifiable trail showing who was notified and when. Announcing to all staff or posting on a unit whiteboard violates patient privacy and can spread information inappropriately or cause confusion. Faxing results to the patient without involving the clinician bypasses clinical judgment, risks misinterpretation, and lacks the necessary documentation and guidance for next steps.

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://nhsamodule5.examzify.com

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