

RadReview Radiation Protection Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of 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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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!

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Questions

- 1. All the following statements regarding TLDs are true except?**
 - A. TLDs are reusable**
 - B. A TLD is a personal radiation monitor**
 - C. TLDs use a lithium fluoride phosphor**
 - D. TLDs emit heat in response to stimulation by light**
- 2. How many HVLs are required to reduce the intensity of a beam of monoenergetic photons to less than 15% of its original value?**
 - A. 2**
 - B. 3**
 - C. 4**
 - D. 5**
- 3. If the exposure rate is 0.5 mGy/hr at 7.0 feet, what will be the dose received after 20 minutes at a distance of 3.0 feet from the source?**
 - A. 0.45 mGy**
 - B. 0.90 mGy**
 - C. 1.10 mGy**
 - D. 0.75 mGy**
- 4. What is the maximum tabletop radiation intensity allowed during high-level fluoroscopy?**
 - A. 100 mGya/min**
 - B. 200 mGya/min**
 - C. 21 mGya/min/mA**
 - D. 500 mGya/min**
- 5. In radiation protection, what principle minimizes dose to staff and patients?**
 - A. Distance**
 - B. Duration**
 - C. Shielding**
 - D. All of the above**

- 6. What is the significance of the repair period in radiation exposure?**
- A. It allows cells to mutate**
 - B. It is when symptoms of radiation sickness appear**
 - C. It is a time for DNA repair**
 - D. It indicates the time to resume activities**
- 7. What is the primary risk associated with internal radiation exposure?**
- A. It only affects the skin**
 - B. It can lead to localized damage and increased cancer risk**
 - C. It can be easily eliminated from the body**
 - D. It has a low risk factor compared to external exposure**
- 8. Which methods can increase the effective energy of an x-ray beam?**
- A. Added filtration**
 - B. Kilovoltage**
 - C. Both added filtration and kilovoltage**
 - D. Milliamperage**
- 9. Which factor does NOT affect patient dose?**
- A. Kilovoltage**
 - B. Milliamperage-seconds**
 - C. Focal spot size**
 - D. Inherent filtration**
- 10. How does the addition of aluminum filtration affect patient dose?**
- A. Increases patient dose**
 - B. Reduces patient dose**
 - C. No effect on patient dose**
 - D. Only affects skin dose**

Answers

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

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Explanations

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1. All the following statements regarding TLDs are true except?

- A. TLDs are reusable**
- B. A TLD is a personal radiation monitor**
- C. TLDs use a lithium fluoride phosphor**
- D. TLDs emit heat in response to stimulation by light**

Thermoluminescent dosimeters (TLDs) are indeed personal radiation monitors that utilize materials such as lithium fluoride to detect ionizing radiation. When exposed to radiation, TLDs absorb energy and store it. The reason the answer is that TLDs emit heat in response to stimulation by light is because TLDs actually release their stored energy as visible light when heated, rather than emitting heat itself. This process is called thermoluminescence, where the TLD is heated to release the absorbed radiation energy in the form of light, which is then measured to quantify the radiation exposure. The other statements accurately describe characteristics of TLDs. They can be reused after being read and reset, they indeed use lithium fluoride phosphor as their sensing material, and they function as personal monitors that individuals (like medical staff or radiology technicians) carry to measure their exposure to radiation.

2. How many HVLs are required to reduce the intensity of a beam of monoenergetic photons to less than 15% of its original value?

- A. 2**
- B. 3**
- C. 4**
- D. 5**

To determine how many half-value layers (HVLs) are needed to reduce the intensity of a beam of monoenergetic photons to less than 15% of its original value, it's important to understand how HVLs function. Each HVL represents a thickness of material that reduces the intensity of the radiation beam by half. Starting with 100% intensity: 1. After one HVL, the intensity is reduced to 50% ($100\%/2$). 2. After two HVLs, the intensity decreases to 25% ($50\%/2$). 3. After three HVLs, the intensity is reduced to 12.5% ($25\%/2$). At three HVLs, the intensity falls below 15%, reaching 12.5%. This demonstrates that three HVLs are required to achieve an intensity of less than 15%. In contrast, two HVLs would leave the intensity at 25%, which is above the 15% threshold, and four HVLs would reduce the intensity even further, but the requirement is to drop below 15%, which is achieved at three. Thus, the correct answer indicates the minimum number of HVLs necessary to accomplish the specified reduction in intensity.

3. If the exposure rate is 0.5 mGy/hr at 7.0 feet, what will be the dose received after 20 minutes at a distance of 3.0 feet from the source?

A. 0.45 mGy

B. 0.90 mGy

C. 1.10 mGy

D. 0.75 mGy

To determine the dose received after 20 minutes at a distance of 3.0 feet from the radiation source, we first need to understand how exposure rates change with distance. The exposure rate decreases with the square of the distance from the source, following the inverse square law. Initially, the exposure rate is 0.5 mGy/hr at a distance of 7.0 feet. When we need to find the dose at a closer distance (3.0 feet), we must first calculate the new exposure rate at that distance. Using the inverse square law, the exposure rates at different distances can be calculated as follows:
$$\text{New exposure rate} = \text{Original exposure rate} \times \left(\frac{\text{Original distance}^2}{\text{New distance}^2} \right)$$
 In this case, the original exposure rate is 0.5 mGy/hr, the original distance is 7.0 feet, and the new distance is 3.0 feet. Calculating it step by step: 1. Calculate the square of the distances: $7.0^2 = 49$ $3.0^2 = 9$

4. What is the maximum tabletop radiation intensity allowed during high-level fluoroscopy?

A. 100 mGya/min

B. 200 mGya/min

C. 21 mGya/min/mA

D. 500 mGya/min

The maximum tabletop radiation intensity allowed during high-level fluoroscopy is set at 200 mGya/min. This standard is put in place to ensure patient safety while maintaining the effectiveness of imaging procedures. High-level fluoroscopy is utilized in various medical procedures, particularly in interventional radiology, where increased radiation could be necessary for clarity in imaging. However, excessively high radiation exposure can lead to harmful effects; thus, regulatory limits are established. Setting the limit at 200 mGya/min reflects a balance between achieving necessary imaging quality and minimizing exposure risks to patients and healthcare providers. This value is based on extensive research into the effects of radiation and the need to protect individuals from the potential hazards associated with high doses. By adhering to this standard, healthcare facilities can ensure they are within safe operating parameters while still performing necessary diagnostic or therapeutic procedures effectively.

5. In radiation protection, what principle minimizes dose to staff and patients?

- A. Distance**
- B. Duration**
- C. Shielding**
- D. All of the above**

The principle that minimizes dose to staff and patients encompasses all the factors mentioned: distance, duration, and shielding. Distance is foundational in radiation protection; increasing the distance from a radiation source significantly reduces exposure, as radiation intensity diminishes with the square of the distance. This means that even small increases in distance can lead to substantial reductions in dose received. Duration pertains to the amount of time individuals are exposed to a radiation source. The less time spent near the source, the lower the dose received. This is critical in environments where radiation exposure is an occupational hazard, reinforcing the importance of minimizing unnecessary time spent in radiative areas. Shielding involves using barriers or materials that absorb or block radiation, thus providing protection to staff and patients. Different materials are effective against different types of radiation; for instance, lead is commonly used to shield against X-rays and gamma rays. Together, these three principles—distance, duration, and shielding—form a comprehensive approach to radiation safety, effectively minimizing exposure and thereby protecting both staff and patients from potentially harmful doses of radiation.

6. What is the significance of the repair period in radiation exposure?

- A. It allows cells to mutate**
- B. It is when symptoms of radiation sickness appear**
- C. It is a time for DNA repair**
- D. It indicates the time to resume activities**

The significance of the repair period in radiation exposure primarily relates to the ability of cells to repair damage to their DNA caused by radiation. During this time, various cellular mechanisms work to identify and correct the molecular damage, thereby mitigating the potential long-term effects associated with radiation exposure, such as cancer. DNA repair processes can involve direct repair, base excision repair, nucleotide excision repair, and homologous recombination, among others. When cells are exposed to radiation, they may suffer from various forms of damage including single-strand breaks, double-strand breaks, and cross-linking of DNA. The repair period is crucial because successful repair can lead to cell survival and the prevention of mutations that could arise from the unrepaired damage. If the cells are unable to repair the damage effectively, this can lead to further complications, including cell death or the development of malignancies over time. While other options involve aspects related to radiation, they do not directly capture the principal function of the repair period, which is fundamentally about the restoration of cellular integrity following radiation exposure. The focus is primarily on the repair mechanisms that are activated during this period.

7. What is the primary risk associated with internal radiation exposure?

A. It only affects the skin

B. It can lead to localized damage and increased cancer risk

C. It can be easily eliminated from the body

D. It has a low risk factor compared to external exposure

The primary risk associated with internal radiation exposure is that it can lead to localized damage and increased cancer risk. When radioactive substances enter the body—whether through ingestion, inhalation, or wound contamination—they can directly interact with tissues and organs at a cellular level. This proximity to sensitive biological structures elevates the risk of cellular damage, which can disrupt normal cellular functions and potentially lead to cancerous changes over time. Localized damage occurs because the energy released from the radioactive material can produce ionizing radiation, which can break chemical bonds in DNA and other critical cellular components. This damage can trigger mutations or cause cells to die improperly, leading to an increased likelihood of developing cancer. Unlike external radiation, which can pass through the body and typically affects superficial tissues, internal exposure has the potential to impact organ systems directly and is more concentrated, thus posing a greater long-term risk for malignancy. The other choices imply misconceptions, such as the notion that internal exposure only affects the skin, overlooks the serious consequences of internal contamination, or suggests that radioactive materials can simply be eliminated without consequences. This underscores the significant challenges posed by internal radiation exposure compared to external sources.

8. Which methods can increase the effective energy of an x-ray beam?

A. Added filtration

B. Kilovoltage

C. Both added filtration and kilovoltage

D. Milliamperage

Increasing the effective energy of an x-ray beam can be achieved through two primary methods: added filtration and increased kilovoltage: 1. ****Added Filtration****: This involves placing a material, such as aluminum, in the path of the x-ray beam. Filtration helps to remove lower-energy photons from the beam, allowing only higher-energy photons to pass through. This not only increases the average energy of the beam but also reduces patient dose while improving image quality. By eliminating less penetrable x-rays, the effective energy of the x-ray beam is enhanced. 2. ****Kilovoltage (kV)****: Increasing the kilovoltage in an x-ray machine enhances the energy of the x-ray photons produced. Higher kilovoltage results in higher energy x-rays that can penetrate tissues more effectively. This is crucial for obtaining diagnostic quality images, as it allows for better contrast and reduces scatter radiation. Both of these methods work in tandem to increase the overall effectiveness and quality of the x-ray beam. While milliamperage affects the quantity of x-ray photons produced, it does not directly influence the energy of the x-ray beam. Therefore, the inclusion of both added filtration and increasing kilovoltage ensures a more effective and higher energy x-ray beam.

9. Which factor does NOT affect patient dose?

- A. Kilovoltage
- B. Milliampere-seconds
- C. Focal spot size**
- D. Inherent filtration

The correct answer, focal spot size, does not affect patient dose in the same way that other listed factors do. Patient dose is primarily influenced by the amount of radiation emitted during an X-ray procedure, which is significantly determined by kilovoltage and milliampere-seconds. Kilovoltage affects the energy and penetrating power of the X-rays produced, which in turn impacts the dose received by the patient. Higher kilovoltage typically results in a higher patient dose due to increased penetration and potentially more scatter radiation. Milliampere-seconds (mAs) dictate the quantity of X-ray photons produced during an exposure. A higher mAs results in a greater number of X-ray photons reaching the patient, thus increasing the dose. Inherent filtration is the measure of any absorption of low-energy X-rays as they pass through the X-ray tube and its components before reaching the patient. It plays a role in shaping the quality of the beam and can affect dose levels. However, focal spot size primarily influences image resolution and sharpness rather than the quantity of radiation delivered to the patient. Therefore, while kilovoltage, milliampere-seconds, and inherent filtration directly contribute to the patient dose, focal spot size is not a factor in the same

10. How does the addition of aluminum filtration affect patient dose?

- A. Increases patient dose
- B. Reduces patient dose**
- C. No effect on patient dose
- D. Only affects skin dose

The addition of aluminum filtration in radiographic equipment serves to improve the quality of the x-ray beam produced. By filtering out lower-energy x-rays that do not contribute to imaging but increase patient exposure, aluminum filtration effectively enhances the overall penetration of the x-ray beam while simultaneously reducing the amount of radiation that reaches the patient. This process helps in decreasing the patient's dose because the lower-energy photons, which are more likely to be absorbed by the patient's tissues and contribute to unnecessary radiation exposure, are removed from the beam. The result is a reduction in the overall radiation dose received by the patient without compromising the diagnostic quality of the images produced. Furthermore, with adequate filtration, the remaining x-rays that reach the patient are of higher energy, which are more effective at passing through thicker body parts, allowing for sufficient imaging of anatomical structures with a lower total dose. Thus, the addition of aluminum filtration plays a critical role in the optimization of radiation safety for patients in diagnostic radiology.

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://radreviewradprotection.examzify.com>

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