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Question: 1

Which of the following is the goal for treating a tumor?

- A. Interfere with enzyme function
- B. Decrease the risk of lymphedema
- C. Lower blood pressure

Answer: A

Explanation:

Tumors increase in size based on their own cell reproduction capacity. When an individual gets treatment for a tumor, the goal is to interfere with enzyme function or substrate utilization related to DNA synthesis or function. Disrupting these processes can interfere with tumor growth and stop it from getting bigger and spreading to other parts of the body.

Question: 2

Which of the following is a local form of treatment that is targeted at a very specific area of a tumor?

- A. Surgery
- B. Chemotherapy
- C. Radiation therapy

Answer: C

Explanation:

Radiation therapy is a local form of treatment that is targeted at a very specific area of a tumor. By using high-energy particles or waves at a very precise location, the treatment can destroy or damage cancer cells.

Question: 3

Which of the following best reflects the recommended acute variables of a resistance training exercise program for an adult client who has cancer or who is a cancer survivor?

- A. 2-3 days per week / 8-10 multijoint exercises / 30-80% 1RM / 1-3 sets / 8-15 reps
- B. 1 day per week / 6-8 isolation exercises / 60-80% 1RM / 1 set / 15-20 reps
- C. 3-5 days per week / 10+ multijoint exercises / 75-85% 1RM / 3-5 sets / 6-8 reps

Answer: A

Explanation:

If you are working with an adult client who has cancer or who is a cancer survivor, the following acute variables are recommended for a resistance training exercise program:

- Modes of training: This will vary from client to client. Choose activities that your client is able to perform and enjoys doing.
- 2-3 days per week
- 30-80% 1RM
- 1-3 sets per exercise
- 8-15 repetitions
- Resting period: 1-3 minutes

Keep in mind that these variables might need to be adjusted based on the results of exercise testing and assessments detailing symptom severity in response to exercise intensity and duration.

Question: 4

Which of the following best reflects the recommended acute variables of a resistance training exercise program for a client with chronic heart failure?

- A. 3-5 days per week / 80-100% 1RM / 5 sets / 3-7 reps / 90+ sec rest
- B. 2-3 days per week / 40-80% 1RM / 1 set / 10-15 reps / 30 sec rest
- C. 1 day per week / 70-80% 1RM / 3 sets / 12-15 reps / 60 sec rest

Answer: B

Explanation:

If you are working with a client who has chronic heart failure, the following acute variables are recommended for a resistance training exercise program:

- 2-3 days per week
- Light intensity: 40-80% 1RM
- 1 set in a circuit workout format
- 10-15 repetitions
- Resting period: 30 seconds or less

Keep in mind that these variables might need to be adjusted based on the results of exercise testing and assessments detailing symptom severity in response to exercise intensity and duration.

Question: 5

Which of the following is described as a type of lupus that primarily affects the skin without internal disease?

- A. Discoid lupus erythematosus
- B. Lupus erythematosus
- C. Systemic lupus erythematosus

Answer: A

Explanation:

The type of lupus that primarily affects the skin without internal disease is known as discoid lupus erythematosus.

On the other end of the spectrum, systemic lupus erythematosus is an internal form of lupus that may be classified as either nonorgan threatening or organ threatening.

Question: 6

Which of the following best reflects the recommended acute variables of a resistance training exercise program for a client with hemophilia?

- A. 3-5 days per week / 6-8 exercises / 70-90% 1RM / 3-5 sets / 10-15 reps
- B. 2-3 days per week / 8-10 multijoint exercises / 40-80% 1RM / 2-3 sets / 8-12 reps
- C. 2 days per week / 8-10 multijoint exercises / 40-70% 1RM / 1 set / 10-20 reps

Answer: C

Explanation:

If you are working with a client who has hemophilia, the following acute variables are recommended for a resistance training exercise program:

- 2 days per week (eventually progress to the point of five days per week with a split body program)
- 8-10 multijoint exercises
- 40-70% 1RM
- 1 set per exercise (progress to 2 to 3 sets)
- 10-20 repetitions
- Resting period: Between 1 to 2 minutes

Keep in mind that these variables might need to be adjusted based on the results of exercise testing and assessments detailing symptom severity in response to exercise intensity and duration.

Question: 7

Clients who sustained traumatic brain injuries (TBIs) may not participate in an exercise program until which of the following occurs?

- A. Clients purchase medical fitness gear as ordered by a doctor
- B. Clients receive full medical clearance
- C. Medication is taken as ordered

Answer: B

Explanation:

Studies show the safety and efficacy of exercise in patients with traumatic brain injuries. With that said, it is not recommended that exercise professionals train these clients until they receive full medical clearance from their physician or other health care professional.

Once they receive clearance, clients who have sustained TBI may participate in both resistance training and cardiovascular training.

Question: 8

Which of the following best reflects the recommended acute variables of a flexibility exercise program for a client with rheumatoid arthritis (RA)?

- A. 1-3 days per week / Static stretching / 8-10 stretches / Hold 5-10 sec (progress to 20 sec)
- B. 3-4 days per week / Dynamic stretching / 6-8 stretches / 20-30 seconds each
- C. 5-7 days per week / Ballistic stretching / 8-10 stretches / 15-30 seconds each

Answer: A

Explanation:

If you are working with a client with rheumatoid arthritis (RA), the following acute variables are recommended for a standard flexibility exercise program:

- 1-3 days per week
- Full-body flexibility exercises, starting with static stretching. As the client progresses, consider range of motion, functional activities, yoga, tai chi, and stretching.
- 8 - 10 static stretches
- Hold stretches for 5-10 seconds initially, progressing to 20 seconds per hold as tolerated.

Keep in mind that these variables might need to be adjusted based on the results of exercise testing and assessments detailing symptom severity in response to exercise intensity and duration. For clients with RA, pain during exercise will be the most common issue.

Question: 9

Which of the following best reflects the recommended acute variables of an aerobic exercise program for an older client?

- A. 5-7 days per week / Swimming / 60-90% MHR / 20-60 min
- B. 1 day per week / Walking / 40-60% VO₂ / 25-45 min
- C. 3-4 days per week / HIIT / 90-100% MHR / 10-15 min

Answer: A

Explanation:

If you are working with an older client, the following acute variables are recommended for a standard aerobic exercise program:

- 5-7 days per week
- Focus on large muscle group activities such as walking, swimming, and water aerobics
- 60-90% MHR
- 20-60 minutes per session
- Allow breaks as needed; usually between 1 and 3 minutes

Keep in mind that these variables might need to be adjusted based on the results of exercise testing and assessments detailing symptom severity in response to exercise intensity and duration.

Question: 10

Which of the following BMIs is associated with a 30-fold greater risk of developing type 2 diabetes?

- A. > 35
- B. < 23
- C. < 29

Answer: A

Explanation:

Studies show that individuals with a BMI (body mass index) greater than 35 have up to a 30-fold greater risk of developing type 2 diabetes compared to individuals with a BMI less than 23.

In the United States, approximately 29.1 million people have diabetes while another 86 million are estimated to have prediabetes. Over 75% of type 2 diabetes cases occur among obese, inactive adults.

Question: 11

What is one of the best methods for pulmonary rehabilitation in individuals with COPD (chronic obstructive pulmonary disease)?

- A. Surgery
- B. Exercise
- C. Medication

Answer: B

Explanation:

One of the best methods for pulmonary rehabilitation in individuals with COPD is exercise and physical activity. Studies show that engaging in a consistent and appropriate exercise program can help to decrease systemic inflammation caused by COPD.

Exercise training can also increase exercise capacity, muscle strength, and overall improve quality of life, both socially and during daily activities.

Question: 12

Which of the following best reflects the recommended acute variables of an aerobic exercise program for a client with coronary artery bypass grafting (CABG) or percutaneous transluminal coronary angioplasty (PTCA)?

- A. 4-7 days per week / Cycling / 40-80% VO₂ / 20-60 minutes
- B. 1-2 days per week / HIIT / 80-100% VO₂ / 15-25 minutes

C. ≥ 4 days per week / Walking / 40-80% VO₂ / 20-60 minutes

Answer: A

Explanation:

If you are working with a client with coronary artery bypass grafting (CABG) or percutaneous transluminal coronary angioplasty (PTCA), the following acute variables are recommended for a standard aerobic exercise program:

- 4-7 days per week
- Large muscle group activities such as walking, jogging, or cycling
- 40-80% VO₂; or 12-16 RPE (on Borg 6- to 20-point scale)
- 20 to 60 minutes or more of either continuous or accumulated exercise throughout the day; for example, the client can perform two to six bouts of 10 minutes each
- An overall increase in daily living activities

Keep in mind that these variables might need to be adjusted based on the results of exercise testing and assessments detailing symptom severity in response to exercise intensity and duration.

Question: 13

Which of the following best reflects the recommended acute variables of a resistance training exercise program for a client with HIV/AIDS?

- A. 3-5 days per week / 6-8 exercises / 70-90% 1RM / 3-5 sets / 10-15 reps
- B. 2-3 days per week / 8-10 multijoint exercises / 40-80% 1RM / 2-3 sets / 8-12 reps
- C. 1-2 days per week / 8-10 multijoint exercises / 40-60% 1RM / 1 sets / 10-15 reps

Answer: B

Explanation:

If you are working with a client who has HIV/AIDS, the following acute variables are recommended for a resistance training exercise program:

- 2-3 days per week (Frequency will vary based on post-exertion symptomatology)
- 8-10 multijoint exercises
- 40-80% 1RM
- 2-3 set per exercise
- 8-12 repetitions
- Resting period: Between 1 to 2 minutes

Keep in mind that these variables might need to be adjusted based on the results of exercise testing and assessments detailing symptom severity in response to exercise intensity and duration.

Question: 15

Which of the following is a sideways curvature of the spine?

- A. Hyperlordosis

- B. Hyperkyphosis
C. Scoliosis

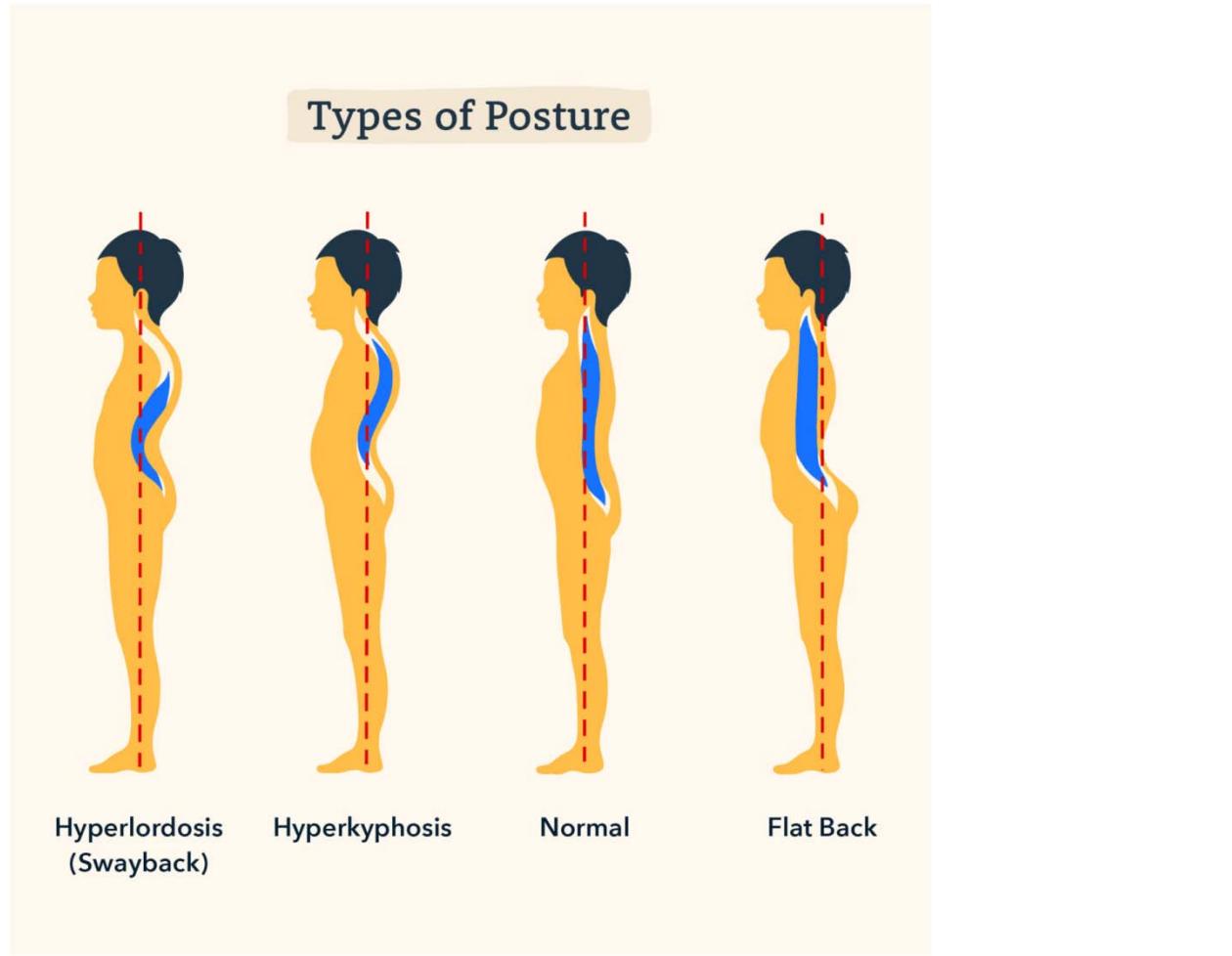
Answer: C

Explanation:

Scoliosis is a mediolateral curvature or sideways curvature of the spine. Scoliosis can lead to compromised movement patterns, pain, reduced physical functioning, and impaired respiratory functions. Trainers should note that scoliosis commonly occurs during the growth spurt before puberty. If you are working with children or adolescents, you should design a program that focuses on proper posture to decrease the risk of scoliosis forming.

Hyperkyphosis refers to an excessive curvature of the thoracic spine, commonly referred to as hunchback. A kyphosis angle over 50 degrees is currently the standard for defining hyperkyphosis.

Hyperlordosis is a condition in which there is an excessive spine curvature in the lower back. Hyperlordosis creates a characteristic C-shaped curve in the lower back, or lumbar region, where the spine curves inward just above the buttocks. It often occurs as a result of poor posture or a lack of exercise.



In all four standing postures, a body is viewed from the side and a dashed vertical line running from the center of the head to the feet. The shape of the spine is highlighted in each. From left to right, the bodies are arranged to show spines from most curved to straight.

1. With hyperlordosis (also known as swayback), the lower back curves forward in a C-shape.
2. With hyperkyphosis, the back is curved deeper than normal in the upper spinal region.
3. With a normal posture, the back is straight with a slight curve in the middle.
4. With flat back, the spine is straight, causing the pelvic region to jut out backwards.

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