Academy of Certified Brain Injury Specialists (ACBIS) Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Questions



1. What is the term for excessive thirst?

- A. Polydipsia
- B. Polyuria
- C. Polydipsi
- D. Polio

2. In A-B-C data, what does the "A" stand for?

- A. Actions following the behavior
- **B.** Anticipation of consequences
- C. Antecedents to the behavior
- D. Assessment of behavior frequency

3. What is the main function of the cortex in the brain?

- A. Coordination of movement
- **B. Processing sensory information**
- C. Higher-level cognitive functions
- D. Regulating autonomic functions

4. Which part is primarily responsible for communication within the nervous system?

- A. Action potentials
- **B.** Neurons
- C. Neurotransmitters
- D. Dendrites

5. What is a characteristic of a preferred provider organization?

- A. Mandatory hospital admissions
- B. Fixed physicians only for access
- C. Elective contracting and risk sharing
- D. No quality controls

6. What is the purpose of a tracheostomy?

- A. To enhance vocalization
- B. To assist with breathing
- C. To remove lung tumors
- D. To provide nutrition

- 7. Which of the following best describes mutual reinforcement?
 - A. One person receives all the motivation
 - B. Exchange of reinforcers between two or more individuals
 - C. A single reinforcement from one participant
 - D. Unilateral support in a relationship
- 8. What is a significant effect of memory problems after a brain injury?
 - A. Increased social interaction
 - B. Decreased physical activity
 - C. Impaired ability to retain new information
 - D. Enhancement of problem-solving skills
- 9. Which organ vibrates in response to sound waves and has tiny sensitive hairs connected to nerve fibers?
 - A. Cochlea
 - **B.** Auditory Cortex
 - C. Corti
 - D. Semicircular Canals
- 10. What does peristalsis refer to?
 - A. Involuntary muscle contractions in the heart
 - B. Coordinated contractions of smooth muscle in the digestive tract
 - C. The process of respiration
 - D. Reflexes of the nervous system

Answers



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



Explanations



1. What is the term for excessive thirst?

- A. Polydipsia
- **B.** Polyuria
- C. Polydipsi
- D. Polio

The term for excessive thirst is polydipsia. This condition is often associated with various medical conditions, including diabetes mellitus and diabetes insipidus, where the body experiences increased fluid needs and a subsequent increase in thirst. Understanding this term is crucial for those in the field of brain injury rehabilitation, as certain neurological disorders or the effects of medications can influence a patient's thirst response, leading to polydipsia. The other terms listed refer to different medical conditions. Polyuria refers to an increased production of urine, which can also be linked to diabetes but is distinct from thirst. Polydipsi seems like a misspelling of polydipsia and is not formally recognized in medical terminology. Polio, short for poliomyelitis, is a viral disease that can affect motor neurons, leading to paralysis and has no relation to the concept of thirst. Understanding these distinctions helps in recognizing the specific symptoms and conditions that can affect individuals, especially those with brain injuries.

2. In A-B-C data, what does the "A" stand for?

- A. Actions following the behavior
- B. Anticipation of consequences
- C. Antecedents to the behavior
- D. Assessment of behavior frequency

In A-B-C data, the "A" refers to "Antecedents to the behavior." This component is crucial because it identifies the events or conditions that occur before a specific behavior takes place. By analyzing these antecedents, practitioners can understand the triggers that lead to certain behaviors. This understanding is essential for developing interventions aimed at modifying those behaviors, as it allows specialists to address the factors that initiate the behavior in the first place. Examining antecedents helps to create a clearer picture of the context in which the behavior occurs, which is vital for designing effective strategies to promote more adaptive behaviors. Recognizing these triggers can lead to proactive approaches in managing behaviors rather than reactive strategies that may only address symptoms without understanding their origins.



3. What is the main function of the cortex in the brain?

- A. Coordination of movement
- **B.** Processing sensory information
- C. Higher-level cognitive functions
- D. Regulating autonomic functions

The main function of the cortex in the brain involves higher-level cognitive functions. The cortex, particularly the cerebral cortex, is responsible for a variety of complex processes that include reasoning, problem-solving, decision-making, and planning. It is also involved in personality and social behavior, which are key aspects of cognitive functioning. The cortex is organized into different areas that specialize in various cognitive tasks. For example, the prefrontal cortex is vital for executive functions such as attention, judgment, and control of social behavior. This specialization highlights the critical role the cortex plays in our ability to engage in abstract thinking and to navigate complex social and environmental challenges. While the other options describe important functions of different brain regions, they do not reflect the primary role of the cortex. For instance, coordination of movement is primarily managed by regions such as the cerebellum and basal ganglia. The processing of sensory information occurs mainly in specific areas of the cortex that correspond to different senses, but this is a more basic function compared to the higher-level cognitive processes associated with the cortex. Regulating autonomic functions is mainly overseen by the brainstem and other subcortical structures, emphasizing that these functions are distinct from the more complex cognitive operations that the cortex handles.

4. Which part is primarily responsible for communication within the nervous system?

- A. Action potentials
- **B.** Neurons
- C. Neurotransmitters
- D. Dendrites

The primary component responsible for communication within the nervous system is neurons. Neurons are specialized cells that transmit information throughout the body using both electrical and chemical signals. They consist of three main parts: the cell body, axons, and dendrites. Neurons communicate with each other at synapses through neurotransmitters, but the actual signaling and conduction of impulses are performed by the structure and function of the neurons themselves. While action potentials are crucial for the propagation of electrical signals along the axon of a neuron, they are a process that occurs within neurons rather than a separate entity. Neurotransmitters play an essential role in transmitting signals across synapses, but they are released and utilized by neurons. Dendrites are crucial for receiving inputs from other neurons, but they are just one part of the neuron. Overall, the unique and complex structure of neurons enables them to act as the primary communicators in the nervous system, coordinating and processing information rapidly and efficiently.

5. What is a characteristic of a preferred provider organization?

- A. Mandatory hospital admissions
- B. Fixed physicians only for access
- C. Elective contracting and risk sharing
- D. No quality controls

A preferred provider organization (PPO) is designed to offer greater flexibility and choice to its members regarding healthcare services. One of the main characteristics of a PPO is elective contracting, where insurers establish agreements with specific healthcare providers to deliver services at discounted rates. This model allows members to seek care from a variety of doctors and hospitals, rather than being limited to a rigid network. Additionally, risk sharing in a PPO model typically involves shared financial incentives between the insurance company and the healthcare providers. This can encourage providers to offer high-quality care while managing costs effectively, as they share in both the risks and benefits of patient outcomes. Members of a PPO have the option to see any provider, including those outside of the network, though it may come at a higher out-of-pocket cost. In contrast to mandatory hospital admissions or fixed access to physicians, PPOs allow for more flexibility. The statement regarding no quality controls does not accurately reflect the nature of PPOs, as there are often standards and measures in place to ensure care quality. Therefore, the characteristic of elective contracting and risk sharing distinctly defines how PPOs function.

6. What is the purpose of a tracheostomy?

- A. To enhance vocalization
- B. To assist with breathing
- C. To remove lung tumors
- D. To provide nutrition

A tracheostomy is a medical procedure that involves creating an opening in the neck, directly into the trachea (windpipe), to facilitate breathing. This intervention is particularly important for patients who might have obstructed airways due to various reasons, such as severe trauma, respiratory failure, or other medical conditions that hinder normal breathing through the mouth or nose. By establishing a direct airway, a tracheostomy allows for more efficient air exchange and can help improve overall oxygenation, particularly in patients who require long-term ventilation support. Additionally, it reduces the risk of aspiration, which can be a significant concern when patients have compromised airway protection. Other options, while they pertain to various medical procedures and interventions, do not accurately describe the primary function of a tracheostomy. Vocalization enhancement is not a purpose of this procedure, as it typically alters the normal vocal functioning. Similarly, tracheostomy is not performed for removing lung tumors or providing nutrition, which are addressed through completely different medical treatments and interventions. Therefore, understanding the specific purpose of a tracheostomy is crucial for recognizing its role in respiratory support and management of airway issues.

7. Which of the following best describes mutual reinforcement?

- A. One person receives all the motivation
- B. Exchange of reinforcers between two or more individuals
- C. A single reinforcement from one participant
- D. Unilateral support in a relationship

Mutual reinforcement refers to a situation where two or more individuals exchange reinforcers, creating a reciprocal influence on each other's behavior. This concept highlights the interactive nature of reinforcement, emphasizing that each person's actions can be mutually beneficial. For example, in a social or therapeutic context, when one individual supports another, both can experience positive outcomes and behaviors that reinforce each other. This exchange can enhance learning, cooperation, and relationship building. In contrast, the concept of unilateral support or a single reinforcement does not account for the back-and-forth nature of mutual reinforcement. Similarly, having one individual receive all the motivation fails to illustrate the reciprocal relationship that is fundamental to mutual reinforcement. Therefore, B captures the essence of mutual reinforcement by recognizing the value of shared exchanges between individuals, demonstrating how their behaviors can influence and strengthen one another.

8. What is a significant effect of memory problems after a brain injury?

- A. Increased social interaction
- B. Decreased physical activity
- C. Impaired ability to retain new information
- D. Enhancement of problem-solving skills

Memory problems following a brain injury often lead to a significant impairment in the ability to retain new information. This is primarily due to the brain's involvement in various processes related to learning and memory, such as encoding, storage, and retrieval of information. When there are disruptions in these areas, individuals may struggle to remember new experiences, facts, or skills, which can greatly hinder their ability to learn and adapt in everyday situations. For example, someone who has sustained a brain injury may forget recent conversations, struggle to remember instructions, or find it challenging to learn new tasks, affecting their independence and overall quality of life. This impairment can also impact their social interactions, academic pursuits, and job performance, which underscores the pervasive effects of memory issues post-injury. The other options present scenarios that are less directly related to the primary consequences of memory problems. Increased social interaction, for instance, could occur in a context where an individual is trying to compensate for memory challenges, while decreased physical activity might stem from various factors, not solely memory issues. Enhancement of problem-solving skills is generally not a typical result of memory impairments; rather, difficulties in retaining information can hinder effective problem-solving.

- 9. Which organ vibrates in response to sound waves and has tiny sensitive hairs connected to nerve fibers?
 - A. Cochlea
 - **B.** Auditory Cortex
 - C. Corti
 - D. Semicircular Canals

The correct answer is the cochlea, which is the part of the inner ear responsible for converting sound waves into nervous impulses that the brain interprets as sound. The cochlea is a spiral-shaped organ filled with fluid and has tiny hair cells that play a crucial role in hearing. When sound waves enter the cochlea, they cause the fluid inside to move, which in turn causes these delicate hair cells to vibrate. The movement of the hair cells generates nerve impulses that travel through the auditory nerve to the brain, where the sound is processed. The auditory cortex is not involved in the physical vibration in response to sound waves; rather, it is part of the brain where auditory information is processed after it has been converted into nerve signals. The structure known as the organ of Corti is found within the cochlea and contains the hair cells, but it is not the part that vibrates in response to sound waves itself. Lastly, the semicircular canals are involved in balance and spatial orientation, not in the processing of sound.

10. What does peristalsis refer to?

- A. Involuntary muscle contractions in the heart
- B. Coordinated contractions of smooth muscle in the digestive tract
- C. The process of respiration
- D. Reflexes of the nervous system

Peristalsis specifically refers to the coordinated contractions of smooth muscle in the digestive tract that facilitate the movement of food along the gastrointestinal system. This process is essential for digestion, as it helps to push food through the esophagus, stomach, and intestines. The contractions are involuntary, meaning they occur without conscious control, ensuring that the digestive system can function efficiently regardless of a person's awareness or voluntary action. The smooth muscle layer of the gastrointestinal tract contracts in a wave-like motion, which helps to mix food with digestive juices and propel it forward. This coordinated activity is crucial for effective digestion and absorption of nutrients. Understanding that peristalsis is not associated with heart contractions, respiration processes, or reflexive nervous actions is important in grasping its specific role in digestion. Each of those functions pertains to different physiological systems and mechanisms, underscoring the distinct importance of peristalsis within the digestive tract.