

ACSM Cancer Exercise Trainer (CET) 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

- 1. Nociceptive pain is primarily caused by damage to what areas?**
 - A. Skin, muscles, connective tissue, and viscera**
 - B. Brain and spinal cord**
 - C. Organs only**
 - D. Muscles and nerves**
- 2. What do oncogenes do in relation to cellular activity?**
 - A. Cause inactivation of genes**
 - B. Induce increased activity**
 - C. Cause programmed cell death**
 - D. Inhibit blood vessel formation**
- 3. What is the recommended frequency of exercise for cancer survivors according to ACSM?**
 - A. At least 150 minutes of low-intensity exercise per week**
 - B. At least 150 minutes of moderate-intensity exercise per week**
 - C. Daily high-intensity training**
 - D. Only strength training sessions twice a week**
- 4. What method is commonly used to treat SCLC?**
 - A. Surgery**
 - B. Chemotherapy**
 - C. Radiation therapy**
 - D. Palliative care**
- 5. What cardiovascular benefits can cancer survivors achieve from regular exercise?**
 - A. Lower cholesterol levels**
 - B. Improved heart health**
 - C. Increased muscle mass**
 - D. Enhanced flexibility**

- 6. When should a cancer survivor consult a healthcare provider before starting an exercise program?**
- A. When they have gained significant weight**
 - B. When they have significant co-morbidities or complications**
 - C. When they want to increase their exercise intensity**
 - D. When they are experiencing fatigue**
- 7. What does restrictive cardiomyopathy refer to?**
- A. Increased heart enlargement**
 - B. Decreased ability of the heart to expand**
 - C. Fluid build-up around the heart**
 - D. Uncontrolled heart rhythm**
- 8. Which type of cancer originates in supportive or connective tissues such as muscle and bone?**
- A. Leukemia**
 - B. Sarcoma**
 - C. C carcinoma**
 - D. Lymphoma**
- 9. What is the estimated total energy needs for underweight patients?**
- A. 20 - 25 calories/kg**
 - B. 25 - 30 calories/kg**
 - C. 30 - 35 calories/kg**
 - D. 35 - 40 calories/kg**
- 10. A higher Gleason score indicates what regarding the tumor?**
- A. The tumor is less likely to spread**
 - B. The tumor is more likely to spread**
 - C. The tumor is fully encapsulated**
 - D. The tumor is in an early stage**

Answers

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

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Explanations

1. Nociceptive pain is primarily caused by damage to what areas?

- A. Skin, muscles, connective tissue, and viscera**
- B. Brain and spinal cord**
- C. Organs only**
- D. Muscles and nerves**

Nociceptive pain arises from the activation of nociceptors, which are sensory receptors responsible for detecting harmful stimuli that lead to the sensation of pain. This type of pain is typically associated with damage to tissues in the skin, muscles, connective tissues, and visceral organs. These areas contain nociceptors that respond to a variety of damaging stimuli such as thermal, mechanical, or chemical damage. When these tissues are injured, the nociceptors transmit signals through the peripheral nervous system to the central nervous system, registering the sensation of pain. This pain serves a protective function, alerting the individual to potential harm and encouraging behaviors that may prevent further injury. In contrast, damage to the brain and spinal cord primarily relates to other types of pain, such as neuropathic pain, which arises from nerve damage or dysfunction rather than from direct tissue injury. Focusing solely on specific organs would not encompass the broader range of tissues involved in nociceptive pain, as this pain can originate from various structures, including skin and muscles. While muscles and nerves can be involved, muscles alone do not account for the complete picture since nociceptive pain involves a wider array of tissue types. Thus, the correct answer encompasses the extensive range of

2. What do oncogenes do in relation to cellular activity?

- A. Cause inactivation of genes**
- B. Induce increased activity**
- C. Cause programmed cell death**
- D. Inhibit blood vessel formation**

Oncogenes are crucial players in the regulation of cellular activity, particularly in the context of cancer development. They are mutated forms of normal genes (proto-oncogenes) that promote cell growth and division. When these genes are activated—often due to mutations, translocations, or amplifications—they lead to increased activity within the cell. This heightened activity can manifest as uncontrolled cell proliferation, contributing to tumor formation. In a healthy cell, proto-oncogenes are responsible for normal growth signals; however, when these genes become oncogenes, they drive the cell to replicate beyond what is necessary or normal, often bypassing the regulatory mechanisms that would typically suppress over-proliferation. Thus, the role of oncogenes in inducing increased cellular activity is foundational to understanding how certain tumors develop and progress.

3. What is the recommended frequency of exercise for cancer survivors according to ACSM?

- A. At least 150 minutes of low-intensity exercise per week**
- B. At least 150 minutes of moderate-intensity exercise per week**
- C. Daily high-intensity training**
- D. Only strength training sessions twice a week**

The recommended frequency of exercise for cancer survivors, according to the American College of Sports Medicine (ACSM), emphasizes the importance of engaging in at least 150 minutes of moderate-intensity exercise per week. This recommendation is based on evidence suggesting that moderate-intensity exercise can significantly enhance physical function, quality of life, and overall well-being for cancer survivors. It aims to improve cardiovascular fitness, muscular strength, and endurance while also addressing fatigue and psychological aspects that may accompany cancer treatment. Moderate-intensity exercise can include activities such as brisk walking, cycling at a gentle pace, or water aerobics, which are more manageable for patients who may be recovering from treatment or dealing with the long-term effects of cancer. The frequency promotes consistency and sustainability, leading to better health outcomes. Higher intensities may not be appropriate for all individuals, especially those in recovery, and focusing solely on strength training sessions or high-intensity training does not fully address the comprehensive fitness needs and safety considerations for most cancer survivors. Integrating moderate-intensity exercises allows survivors to gradually increase their activity levels in a safe and effective manner.

4. What method is commonly used to treat SCLC?

- A. Surgery**
- B. Chemotherapy**
- C. Radiation therapy**
- D. Palliative care**

Small cell lung cancer (SCLC) is typically treated with chemotherapy due to its aggressive nature and the fact that it often spreads rapidly. This cancer type does not usually respond well to surgery because it is frequently diagnosed at a later stage when it has already metastasized. Chemotherapy aims to kill cancer cells throughout the body, making it a crucial treatment option for SCLC. While radiation therapy can be used, especially in combination with chemotherapy, it is not the primary treatment method for SCLC. Palliative care, which focuses on improving the quality of life rather than curing the disease, may be part of the overall treatment plan but is not a method of treatment for the cancer itself. Surgery is rarely an option due to the typical progression and stage at which SCLC is found. Thus, chemotherapy stands out as the standard approach to managing SCLC effectively.

5. What cardiovascular benefits can cancer survivors achieve from regular exercise?

- A. Lower cholesterol levels**
- B. Improved heart health**
- C. Increased muscle mass**
- D. Enhanced flexibility**

Regular exercise provides cancer survivors with various cardiovascular benefits, one of the most significant being improved heart health. Engaging in physical activity positively influences several cardiovascular risk factors, leading to enhanced heart function and circulation. Exercise promotes better blood flow, helps to maintain a healthy blood pressure, reduces inflammation, and can improve the heart's efficiency. For cancer survivors, who may be at higher risk for cardiovascular issues due to the disease itself or treatments such as chemotherapy, maintaining cardiovascular health is particularly crucial. Regular exercise aids in the recovery process, helps mitigate treatment side effects, and reduces the risk of comorbidities, thereby enhancing overall long-term heart health. While lower cholesterol levels, increased muscle mass, and enhanced flexibility are also benefits of exercise, they are not as directly tied to cardiovascular health as the overall improvement in heart function and circulation.

6. When should a cancer survivor consult a healthcare provider before starting an exercise program?

- A. When they have gained significant weight**
- B. When they have significant co-morbidities or complications**
- C. When they want to increase their exercise intensity**
- D. When they are experiencing fatigue**

Consulting a healthcare provider before starting an exercise program is crucial for cancer survivors, especially when they have significant co-morbidities or complications. This is because individuals with cancer may have underlying health conditions or complications from cancer treatments that can affect their ability to exercise safely. For instance, issues such as heart disease, lung problems, or complications from surgeries can all pose risks during physical activity. A healthcare provider can assess the survivor's overall health status, offer personalized recommendations, and ensure that any exercise program is safe and appropriate for their specific circumstances. While gaining significant weight, wanting to increase exercise intensity, and experiencing fatigue may be important factors to consider, they do not necessarily warrant immediate consultation with a healthcare provider in the same way that significant co-morbidities or complications do. Co-morbidities can directly impact the safety and effectiveness of the exercise regimen, highlighting the importance of professional guidance in those cases.

7. What does restrictive cardiomyopathy refer to?

- A. Increased heart enlargement**
- B. Decreased ability of the heart to expand**
- C. Fluid build-up around the heart**
- D. Uncontrolled heart rhythm**

Restrictive cardiomyopathy is characterized by a decreased ability of the heart muscle to expand and fill with blood properly. This condition arises when the heart's walls become rigid or stiff, which hinders the normal filling of the ventricles during diastole—the phase of the heart cycle when the heart relaxes and fills with blood. As a result, even though the heart may still pump blood effectively during systole (the contraction phase), its overall function is compromised due to the restricted filling capacity. This leads to symptoms such as fatigue and shortness of breath due to reduced cardiac output. In contrast, other options describe different cardiac conditions. Increased heart enlargement pertains to dilated cardiomyopathy, fluid build-up around the heart reflects pericardial effusion rather than restrictive cardiomyopathy, and uncontrolled heart rhythm relates to arrhythmias. Each of these involves distinct pathophysiological processes that are not applicable to the definition of restrictive cardiomyopathy. Understanding these differences reinforces the specific nature of restrictive cardiomyopathy and its implications on heart function.

8. Which type of cancer originates in supportive or connective tissues such as muscle and bone?

- A. Leukemia**
- B. Sarcoma**
- C. C carcinoma**
- D. Lymphoma**

Sarcoma is the correct answer because it specifically refers to a type of cancer that arises from connective tissues, which include bones, muscles, fat, and cartilage. Unlike carcinomas, which originate in epithelial tissues (the tissues lining the surfaces of organs and structures throughout the body), sarcomas develop from the mesenchymal cells that are found within supportive tissues. Understanding the distinctions among cancer types is crucial, particularly because treatment strategies and the behavior of these cancers can vary significantly based on their origin. For example, leukemias originate in blood-forming tissues and primarily affect blood cells rather than supportive tissues. Carcinomas, as mentioned, stem from epithelial cells, while lymphomas develop in the lymphatic system. This delineation helps healthcare professionals tailor appropriate therapeutic approaches for patients with different cancer types.

9. What is the estimated total energy needs for underweight patients?

- A. 20 - 25 calories/kg**
- B. 25 - 30 calories/kg**
- C. 30 - 35 calories/kg**
- D. 35 - 40 calories/kg**

The estimated total energy needs for underweight patients typically fall within the range of 30 to 35 calories per kilogram of body weight. This recommendation is grounded in the increased caloric requirements necessary for these individuals to achieve a healthier weight. Underweight patients often have heightened metabolic rates, and they may need additional calories to support not only weight gain but also to meet the energy demands associated with healing and rebuilding body mass, particularly following illness or treatment for cancer. The parameters for energy requirements can vary based on factors such as the individual's age, activity level, and overall health status, but the range of 30-35 calories/kg is generally accepted as a solid guideline for underweight patients. This caloric intake aims to provide adequate energy to support both physiological needs and nutritional recovery, making it pivotal in developing effective nutrition and exercise interventions for these patients.

10. A higher Gleason score indicates what regarding the tumor?

- A. The tumor is less likely to spread**
- B. The tumor is more likely to spread**
- C. The tumor is fully encapsulated**
- D. The tumor is in an early stage**

A higher Gleason score indicates that the tumor is more likely to spread. The Gleason scoring system is used primarily to evaluate the aggressiveness of prostate cancer by assessing how much the tumor cells differ from normal prostate cells. The score is determined by examining the patterns of cancer cells in prostate tissue samples, with scores typically ranging from 2 to 10. A higher score suggests that the cancer cells are more poorly differentiated, meaning they look and behave less like normal cells. This often correlates with a more aggressive form of cancer that has a greater potential for metastasis to other parts of the body. In contrast to the other options, a lower Gleason score implies that the tumor is generally less aggressive and might be less likely to spread. The idea of the tumor being fully encapsulated or in an early stage relates more to tumor staging rather than grading, making those options less relevant when considering the implications of the Gleason score specifically.

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://acsmcancerexercisetrainer.examzify.com>

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