

ACVIM GENERAL BOARDS PRACTICE TEST (SAMPLE)

STUDY GUIDE



Prepare with structure. Pass with confidence



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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

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- 1. What is the likely diagnosis for a dog with a USG of 1.005 that does not respond to water deprivation?**
 - A. Central diabetes insipidus
 - B. Nephrogenic diabetes insipidus
 - C. Chronic kidney disease
 - D. Acute renal failure

- 2. Which test is considered the most specific for feline asthma?**
 - A. Serum total eosinophils
 - B. Bronchoalveolar lavage eosinophil count
 - C. Radiographic findings
 - D. Clinical signs assessment

- 3. What percentage of sodium is reabsorbed in the proximal tubule?**
 - A. 25-30%
 - B. 50-60%
 - C. 65-70%
 - D. 85-90%

- 4. Where does nephrotoxicity occur for gentamicin?**
 - A. Proximal tubule
 - B. Distal convoluted tubule
 - C. Glomerulus
 - D. Loop of Henle

- 5. Which electrolyte is the most crucial during phase 3 of a cardiac action potential?**
 - A. K⁺
 - B. Ca²⁺
 - C. Na⁺
 - D. Cl⁻

- 6. Which drug is used to treat lead toxicity?**
- A. CaEDTA
 - B. Dimercaprol
 - C. d-Penicillamine
 - D. All of the above
- 7. Which diagnostic tool is most useful for evaluating right-sided heart function?**
- A. Radiography
 - B. Echocardiography
 - C. Electrocardiography
 - D. Blood tests
- 8. What is the most common cause of community-acquired pneumonia in cats?**
- A. Streptococcus pneumoniae
 - B. Mycoplasma
 - C. Chlamydia felis
 - D. Viral infections
- 9. What shifts the O₂ dissociation curve to the right?**
- A. Decreased temperature
 - B. Decreased pH
 - C. Increased temperature and CO₂
 - D. Increased O₂ levels
- 10. What is the preferred treatment for canine lymphoplasmocytic rhinitis?**
- A. Antibiotics and surgery
 - B. Glucocorticoids and/or NSAIDs
 - C. Antihistamines only
 - D. Heat therapy

Answers

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

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Explanations

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1. What is the likely diagnosis for a dog with a USG of 1.005 that does not respond to water deprivation?

- A. Central diabetes insipidus
- B. Nephrogenic diabetes insipidus**
- C. Chronic kidney disease
- D. Acute renal failure

A urine specific gravity (USG) of 1.005 indicates that the dog is producing very dilute urine, which suggests a problem with the kidneys' ability to concentrate urine. In the case of nephrogenic diabetes insipidus, the kidneys are unable to respond to antidiuretic hormone (ADH), even though the hormone is present and normally functions in healthy animals. When faced with water deprivation, a healthy dog's kidneys should concentrate urine and produce a higher USG. However, if the kidneys are not responding to ADH due to a receptor or aquaporin deficiency, the USG remains low despite efforts to encourage concentration through dehydration. Thus, nephrogenic diabetes insipidus is characterized by dilute urine and an inability to concentrate that urine under water deprivation conditions. Other conditions like central diabetes insipidus involve an issue with ADH production rather than kidney response; chronic kidney disease may feature a concentrated, but later on may have dilute urine due to advanced kidney failure; and acute renal failure often shows more severe changes in urine concentration. Therefore, the USG and response to water deprivation distinctly point towards nephrogenic diabetes insipidus as the likely diagnosis in this scenario.

2. Which test is considered the most specific for feline asthma?

- A. Serum total eosinophils
- B. Bronchoalveolar lavage eosinophil count**
- C. Radiographic findings
- D. Clinical signs assessment

The bronchoalveolar lavage eosinophil count is considered the most specific test for diagnosing feline asthma. In this procedure, a bronchoalveolar lavage is performed to collect cells and secretions from the airways. When the sample is analyzed, a significant number of eosinophils is indicative of an asthmatic condition. This is particularly relevant because a high eosinophil count in the lungs reflects the underlying inflammation associated with feline asthma, making it a crucial diagnostic marker. While serum total eosinophils may indicate a systemic allergic response, it is not specific to the lungs or the condition of asthma. Similarly, radiographic findings can suggest asthma or other respiratory conditions, but they lack the specificity offered by direct cellular analysis from the bronchoalveolar lavage. Clinical signs assessment is important for gathering evidence of respiratory distress but does not provide the definitive cellular data that can confirm asthma. Therefore, the bronchoalveolar lavage eosinophil count stands out as the most specific test for this feline respiratory disorder.

3. What percentage of sodium is reabsorbed in the proximal tubule?

- A. 25-30%
- B. 50-60%
- C. 65-70%**
- D. 85-90%

The proximal tubule of the nephron plays a crucial role in the reabsorption of sodium. It is responsible for reabsorbing approximately 65-70% of the sodium filtered through the glomerulus. This process is essential for maintaining fluid and electrolyte balance in the body. Sodium reabsorption in the proximal tubule occurs predominantly through active transport mechanisms. The Na^+/H^+ exchanger and sodium-glucose co-transporters are among the primary transporters facilitating this process. Additionally, the reabsorption of sodium in this segment is coupled with water, which occurs due to osmotic forces, thereby concentrating the remaining solutes in the tubular fluid. Understanding the percentage of sodium reabsorbed in the proximal tubule is important for comprehending renal physiology and the overall function of the kidney in regulating sodium and fluid balance.

4. Where does nephrotoxicity occur for gentamicin?

- A. Proximal tubule**
- B. Distal convoluted tubule
- C. Glomerulus
- D. Loop of Henle

Gentamicin, an aminoglycoside antibiotic, is primarily associated with nephrotoxicity that occurs in the proximal tubule of the nephron. This occurs because gentamicin undergoes significant renal uptake and is concentrated within renal tubular epithelial cells, particularly in the proximal tubules. In these cells, gentamicin can disrupt cellular function, leading to a cascade of effects, including the generation of reactive oxygen species and impaired cellular transport mechanisms. As the proximal tubule is crucial for the reabsorption of water, electrolytes, and other solutes, damage to these cells can result in acute kidney injury characterized by tubular dysfunction. The other parts of the nephron, such as the distal convoluted tubule, glomerulus, and Loop of Henle, are less commonly associated with the nephrotoxic effects of gentamicin, which is why the proximal tubule is recognized as the primary site of gentamicin-induced nephrotoxicity. Understanding this mechanism is important for monitoring and managing potential renal side effects during gentamicin therapy.

5. Which electrolyte is the most crucial during phase 3 of a cardiac action potential?

- A. K^+**
- B. Ca^{2+}
- C. Na^+
- D. Cl^-

During phase 3 of a cardiac action potential, the most crucial electrolyte is potassium, K^+ . This phase is characterized primarily by the repolarization of the cardiac myocyte, which is achieved through the outflow of K^+ ions from the cell. As action potentials progress in cardiac cells, depolarization occurs primarily due to the influx of sodium (Na^+) and calcium (Ca^{2+}) ions during phases 0 and 2, respectively. However, in phase 3, the closure of calcium channels and the opening of potassium channels allow K^+ to exit the cell, leading to repolarization. This movement of K^+ is essential to restore the resting membrane potential and prepare the myocardial cells for the subsequent action potential, thereby maintaining the rhythm of the heart. In summary, potassium's role is critical for repolarization during phase 3, making it the most crucial electrolyte at this stage of the cardiac action potential.

6. Which drug is used to treat lead toxicity?

- A. CaEDTA
- B. Dimercaprol
- C. d-Penicillamine
- D. All of the above**

The treatment of lead toxicity often involves chelating agents, which are substances that bind to heavy metals, allowing them to be excreted from the body. In the context of lead toxicity, three different chelating agents can be utilized, and all are correct options for treatment. Calcium disodium ethylenediaminetetraacetic acid (CaEDTA) is a common chelator used specifically for lead detoxification, particularly when higher levels of contamination are present. It works by binding to lead ions in the bloodstream and facilitating their excretion through the kidneys. Dimercaprol, also known as British anti-Lewisite, is another chelating agent effective against lead. It forms stable complexes with lead ions and enhances urinary excretion. D-Penicillamine is another chelating agent that is effective for removing certain heavy metals, including lead. It functions similarly by binding to lead and can help to reduce body burden. Since all three agents are utilized in the treatment of lead toxicity, the most comprehensive answer is that all listed drugs can serve as treatment options. Each chelator has its specific indications, contraindications, and side effects, but their role in managing lead toxicity is well-established in veterinary and medical practice.

7. Which diagnostic tool is most useful for evaluating right-sided heart function?

- A. Radiography
- B. Echocardiography**
- C. Electrocardiography
- D. Blood tests

Echocardiography is the most useful diagnostic tool for evaluating right-sided heart function because it allows for direct visualization of the heart's structures and functions, including the right atrium, right ventricle, and pulmonary circulation. This imaging technique provides real-time, dynamic assessment of blood flow, chamber size, and wall motion, which are critical for understanding how well the right side of the heart is working. Echocardiography can help identify conditions like right-sided heart failure, pulmonary hypertension, and tricuspid valve disease by providing information on the pressure in the heart chambers and the function of the heart's valves. Additionally, Doppler imaging within echocardiography can measure blood flow across the heart and through the major vessels, enhancing the understanding of hemodynamics specifically related to the right side of the heart. While radiography can provide some insight into heart size and any potential congestion in the lungs, it lacks the detailed functional information that echocardiography provides. Electrocardiography primarily offers information on the electrical activity of the heart and is less focused on structural assessment. Blood tests can indicate underlying conditions, such as heart failure markers, but do not provide specific information on right-sided heart function.

8. What is the most common cause of community-acquired pneumonia in cats?

- A. Streptococcus pneumoniae
- B. Mycoplasma**
- C. Chlamydia felis
- D. Viral infections

The most common cause of community-acquired pneumonia in cats is Mycoplasma. Mycoplasma species are often associated with respiratory conditions in cats, particularly in younger or immunocompromised individuals. They can cause interstitial pneumonia and have been documented as opportunistic pathogens, especially when the respiratory tract is compromised due to other underlying issues. In cats, Mycoplasma can lead to chronic respiratory problems and is frequently isolated in cases of pneumonia associated with feline viral diseases, further complicating the clinical picture. The bacterial nature of Mycoplasma allows it to thrive in the respiratory epithelium, contributing to inflammation and pneumonia. While other pathogens like Streptococcus pneumoniae, Chlamydia felis, and various viral infections can also cause respiratory issues or pneumonia, they are less common as primary agents of community-acquired pneumonia in feline patients. Streptococcus pneumoniae is more associated with humans, Chlamydia felis typically causes conjunctivitis and respiratory disease rather than pneumonia on its own, and viral infections often serve as predisposing factors rather than direct causes.

9. What shifts the O₂ dissociation curve to the right?

- A. Decreased temperature
- B. Decreased pH
- C. Increased temperature and CO₂**
- D. Increased O₂ levels

The oxygen dissociation curve illustrates how readily hemoglobin binds to and releases oxygen under varying conditions. A rightward shift in this curve indicates that hemoglobin's affinity for oxygen decreases, facilitating oxygen release to tissues. Increased temperature and elevated levels of carbon dioxide (CO₂) are the primary factors that can cause a rightward shift. When temperatures rise, hemoglobin's structure changes, leading to a decrease in its oxygen-binding affinity. Similarly, increased CO₂ levels promote a process known as the Bohr effect, whereby the presence of more CO₂ leads to the release of protons (H⁺ ions), causing a decrease in pH within the blood. This acidotic environment further reduces hemoglobin's affinity for oxygen, thus encouraging oxygen delivery to metabolically active tissues that require more oxygen, particularly during strenuous activity or in conditions of high metabolic demand. In summary, the combination of increased temperature and CO₂ concentrations effectively enhances tissue oxygenation by encouraging hemoglobin to release oxygen more readily.

10. What is the preferred treatment for canine lymphoplasmocytic rhinitis?

- A. Antibiotics and surgery
- B. Glucocorticoids and/or NSAIDs**
- C. Antihistamines only
- D. Heat therapy

Canine lymphoplasmocytic rhinitis is an inflammatory condition of the nasal mucosa, characterized by a predominance of lymphocytes and plasma cells in the infiltrate. The main goal of treatment for this condition is to reduce inflammation and improve the comfort of the affected dog. Glucocorticoids are particularly effective in managing conditions associated with inflammation because they have powerful anti-inflammatory properties. They help decrease the immune response, reducing the infiltration of inflammatory cells into the nasal tissue. NSAIDs may also be used for their anti-inflammatory effects and to alleviate discomfort. Together, the use of glucocorticoids and NSAIDs can effectively control the symptoms of lymphoplasmocytic rhinitis, providing relief from nasal congestion and other related signs. Other treatment options, such as antibiotics, are not the preferred approach because lymphoplasmocytic rhinitis is not primarily caused by bacterial infections. While antihistamines can be used for some allergic conditions, they are not as effective in treating the underlying inflammation seen in lymphoplasmocytic rhinitis. Heat therapy does not address the inflammation and symptoms associated with this specific condition. Therefore, the combination of glucocorticoids and/or NSAIDs is recognized as the preferred treatment to manage and alleviate the symptoms of canine

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://acvimgenboards.examzify.com>

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

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