

American Board of Lifestyle Medicine 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

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- 1. When approaching behavior change in patients, what is the most effective way to facilitate readiness to change?**
 - A. Create awareness of health risks.**
 - B. Offer actionable steps for change.**
 - C. Motivate through negative consequences.**
 - D. Provide social support networks.**

- 2. If an individual has taken action but has not yet consistently met their goals, what stage of change are they likely in?**
 - A. Contemplation stage**
 - B. Preparation stage**
 - C. Action stage**
 - D. Maintenance stage**

- 3. According to social learning theory, how do individuals primarily learn behaviors?**
 - A. By memorizing facts**
 - B. Through direct experience**
 - C. By observing others**
 - D. Through formal education**

- 4. What cognitive distortion is represented by the statement: "That jerk just cut me off and made me spill my coffee, they just ruined my day"?**
 - A. Personalization and blame**
 - B. Emotional reasoning**
 - C. Labeling/mislabeling**
 - D. Disqualifying the positive**

- 5. How does aerobic exercise affect resting heart rate?**
 - A. Aerobic: no change**
 - B. Aerobic: moderate increase**
 - C. Aerobic: significant decrease**
 - D. Aerobic: moderate decrease**

6. How is the action stage defined in the transtheoretical model of behavior change?

- A. Changes have been made for less than 6 months.**
- B. Sustained changes occur for at least 6 months.**
- C. No intention to change has been expressed.**
- D. Patients are pre-executing plans for change.**

7. What classification is given to uncontrolled type 1 diabetes regarding physical activity during pregnancy?

- A. Relative contraindication**
- B. Not assessed**
- C. Absolute contraindication**
- D. Advisable**

8. Which of the following is most accurate about calorie expenditure in daily total energy expenditure calculations?

- A. Daily total energy expenditure is solely based on resting energy**
- B. Physical activity accounts for 15 to >30% of total energy expenditure**
- C. Resting energy expenditure contributes to 50% of total energy expenditure**
- D. Thermic activity is the main contributor to daily energy expenditure**

9. What is the most appropriate next step for an individual already making changes to tackle unhealthy eating habits?

- A. Develop a relapse prevention plan if he has been making the change for 3 months**
- B. Discuss health risks associated with his unhealthy eating habit**
- C. Give him an action plan if he is not meeting his goal yet**
- D. Use CBT to reframe any unhealthy thought patterns**

10. At what stage of the transtheoretical model does a patient decide a change is necessary and intends to take action within the next month?

- A. Contemplation**
- B. Preparation**
- C. Precontemplation**
- D. Maintenance**

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Answers

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

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Explanations

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1. When approaching behavior change in patients, what is the most effective way to facilitate readiness to change?

- A. Create awareness of health risks.**
- B. Offer actionable steps for change.**
- C. Motivate through negative consequences.**
- D. Provide social support networks.**

Creating awareness of health risks is an essential first step in facilitating readiness to change in patients. This approach enables individuals to recognize the potential consequences of their current behaviors and can evoke an emotional response that leads to a desire for change. By understanding the serious health implications associated with their lifestyle choices—such as the risk of chronic diseases, poor quality of life, and premature mortality—patients may become more receptive to adopting healthier behaviors. This process often involves providing information about how specific behaviors impact health, tailored to the individual's situation and background. It helps to personalize the message so that the patient can see the relevance of the health risks in their own life. This heightened awareness serves as a catalyst for motivation, encouraging patients to contemplate the need for change and view it as a priority, rather than an optional lifestyle adjustment. In contrast, while offering actionable steps can also be important, these steps may not be effective without a foundational understanding of why change is necessary. Motivating through negative consequences might induce fear but does not typically foster a sustainable desire for change. Providing social support networks can play a role after the individual has reached a certain level of readiness, but it is not the initial step in the change process. Thus, creating awareness of health risks lays the groundwork for

2. If an individual has taken action but has not yet consistently met their goals, what stage of change are they likely in?

- A. Contemplation stage**
- B. Preparation stage**
- C. Action stage**
- D. Maintenance stage**

The individual described is in the Preparation stage of change. This stage is characterized by the commitment to take action and to make changes in their lifestyle, even if they haven't consistently met their goals yet. In this phase, individuals often start to develop a plan and may take small steps towards their objectives, indicating they are preparing for more substantial change. In the Preparation stage, individuals are likely to gather resources, seek support, or engage in initial behaviors related to their goals. They recognize the importance of making these changes and are taking proactive steps, although they might not yet have established a consistent pattern of behavior. In contrast, the Contemplation stage is about thinking and planning without taking action, while the Action stage denotes actively pursuing and implementing behavior changes. Finally, the Maintenance stage is the phase where individuals consistently engage in their new behaviors and work to sustain changes over time. Since the individual in question has made some attempts but lacks consistency, the Preparation stage is the most fitting categorization for their current situation.

3. According to social learning theory, how do individuals primarily learn behaviors?

- A. By memorizing facts**
- B. Through direct experience**
- C. By observing others**
- D. Through formal education**

Individuals primarily learn behaviors by observing others, as highlighted in social learning theory. This theory posits that much of what we learn occurs in a social context through the process of observation and imitation. This means that individuals can acquire new behaviors simply by watching others perform them, without needing to experience those behaviors directly themselves. For example, if a child sees a peer successfully ride a bike and receive praise for it, they may decide to try riding a bike themselves, often mimicking the behaviors and techniques they observed. This observational learning can influence a wide range of behaviors, from simple tasks to complex social interactions. While other options, such as memorizing facts, experiencing things directly, or formal education, contribute to learning, they do not encapsulate the essence of social learning theory, which emphasizes the role of social influence and observational learning in behavior acquisition.

4. What cognitive distortion is represented by the statement: "That jerk just cut me off and made me spill my coffee, they just ruined my day"?

- A. Personalization and blame**
- B. Emotional reasoning**
- C. Labeling/mislabeling**
- D. Disqualifying the positive**

The statement reflects the cognitive distortion of personalization and blame because it demonstrates a tendency to attribute one's negative feelings and experiences directly to the actions of others. In this case, the individual is expressing a strong emotional reaction to being cut off in traffic, suggesting that this external event has the power to determine their entire day's outcome. The use of the phrase "that jerk" indicates a judgment about the other person's character, which further illustrates a tendency to blame them for one's own emotional state. This distortion often leads individuals to feel victimized and overwhelmed by external circumstances, reinforcing a cycle of negative thinking where they believe they have little control over their emotional responses. Instead of recognizing that their reaction is a personal interpretation of the event, they externalize their feelings and place responsibility for their mood on someone else's behavior. Understanding this type of cognitive distortion can help individuals identify and alter their reaction patterns to promote a healthier mindset and reduce unnecessary stress.

5. How does aerobic exercise affect resting heart rate?

- A. Aerobic: no change**
- B. Aerobic: moderate increase**
- C. Aerobic: significant decrease**
- D. Aerobic: moderate decrease**

Aerobic exercise positively impacts resting heart rate by promoting cardiovascular efficiency and health. Regular aerobic physical activities, such as running, cycling, or swimming, lead to adaptations within the heart and vascular system. One of the most significant adaptations is an increase in the heart's stroke volume, which means the heart can pump more blood with each beat. As a result, the heart does not need to beat as frequently to maintain adequate blood circulation throughout the body during periods of rest. This decrease in resting heart rate indicates improved cardiac efficiency and fitness levels. Individuals who engage in consistent aerobic exercise often find that over time, their resting heart rates lower, reflecting a stronger and more efficient heart. The notion that there is a moderate decrease is well substantiated in exercise physiology, which supports the idea that aerobic exercise leads to significant adaptations that can enhance cardiovascular health. This is why the impact on resting heart rate is generally characterized as a moderate decrease for those who engage in regular aerobic activities.

6. How is the action stage defined in the transtheoretical model of behavior change?

- A. Changes have been made for less than 6 months.**
- B. Sustained changes occur for at least 6 months.**
- C. No intention to change has been expressed.**
- D. Patients are pre-executing plans for change.**

The action stage in the transtheoretical model of behavior change is characterized by individuals who have made specific, overt changes to their behavior within the last six months. This definition emphasizes that the action stage involves not just planning, but an active implementation of changes that require considerable commitment and effort. During this time, individuals are engaged in behaviors that reflect their intention to alter their habits or routines, distinguishing them from earlier stages where contemplation or preparation may be occurring, but action has not yet been taken. In this model, recognizing when an individual is in the action stage allows health professionals to provide appropriate support and resources to help maintain these changes. The emphasis on a timeline of six months is crucial, as this period is often considered necessary for behaviors to solidify into new patterns, transitioning potentially towards maintenance in the next phase. The other options do not align with the established definitions within the transtheoretical model. For instance, the sustained changes for at least six months represent the maintenance stage, where the focus shifts from initial action towards long-term adherence. Lack of intention to change pertains to the precontemplation stage, where individuals are typically unaware or unwilling to consider the need for change. Lastly, pre-executing plans indicates a preparatory phase before actual behaviors

7. What classification is given to uncontrolled type 1 diabetes regarding physical activity during pregnancy?

- A. Relative contraindication**
- B. Not assessed**
- C. Absolute contraindication**
- D. Advisable**

Uncontrolled type 1 diabetes is classified as an absolute contraindication for physical activity during pregnancy. This categorization is crucial because during pregnancy, uncontrolled type 1 diabetes can lead to significant risks for both the mother and the developing fetus. These risks include the potential for hyperglycemia and its associated complications, which can have immediate and long-term effects on maternal and fetal health. In this context, absolute contraindications refer to conditions that severely limit the safety of engaging in physical activity. It is essential for pregnant individuals with uncontrolled type 1 diabetes to manage their blood glucose levels effectively before considering any exercise regimen. This effective management can minimize risks such as diabetic ketoacidosis, which can be life-threatening for both the mother and the baby. Understanding this classification helps healthcare providers make informed recommendations about exercise during pregnancy, emphasizing the need for careful monitoring and control of diabetes before any physical activity is undertaken.

8. Which of the following is most accurate about calorie expenditure in daily total energy expenditure calculations?

- A. Daily total energy expenditure is solely based on resting energy**
- B. Physical activity accounts for 15 to >30% of total energy expenditure**
- C. Resting energy expenditure contributes to 50% of total energy expenditure**
- D. Thermic activity is the main contributor to daily energy expenditure**

The statement regarding physical activity accounting for 15 to over 30% of total energy expenditure is particularly accurate because it reflects the variability and influence of physical activity on energy expenditure. Total daily energy expenditure (TDEE) is composed of several components, primarily resting energy expenditure (REE), physical activity energy expenditure (PAEE), and the thermic effect of food (TEF). While individual factors such as age, sex, weight, and fitness levels can cause variations in the precise percentage of energy expenditure attributed to physical activity, it is well established that active individuals can see their physical activity energy expenditure rising significantly, sometimes exceeding 30%, especially in the case of trained athletes or those with physically demanding jobs. This variability underscores the importance of incorporating physical activity into calculations of total energy expenditure for a more accurate understanding of an individual's energy needs and metabolism. By acknowledging that physical activity plays a critical role in TDEE, the importance of lifestyle modifications toward increasing activity levels for health and weight management is further emphasized.

9. What is the most appropriate next step for an individual already making changes to tackle unhealthy eating habits?

- A. Develop a relapse prevention plan if he has been making the change for 3 months**
- B. Discuss health risks associated with his unhealthy eating habit**
- C. Give him an action plan if he is not meeting his goal yet**
- D. Use CBT to reframe any unhealthy thought patterns**

Utilizing Cognitive Behavioral Therapy (CBT) to reframe unhealthy thought patterns is the most appropriate next step for someone who is already making changes to address unhealthy eating habits. This therapeutic approach focuses on identifying and changing negative thought processes that can hinder progress and reinforce unhealthy behaviors. By helping the individual to recognize and modify these thought patterns, CBT can provide the necessary mental tools to sustain healthy eating habits over the long term. It is particularly relevant when someone has already started making changes, as it builds on their existing motivation and efforts. By addressing the psychological aspects of eating behavior, individuals can develop a healthier relationship with food, improve their emotional resilience against stress or temptation, and enhance their ability to maintain the lifestyle changes they are pursuing. This method fosters self-awareness and empowers individuals to confront triggers and cravings without reverting to previous unhealthy behaviors, ultimately supporting their journey toward sustainable change.

10. At what stage of the transtheoretical model does a patient decide a change is necessary and intends to take action within the next month?

- A. Contemplation**
- B. Preparation**
- C. Precontemplation**
- D. Maintenance**

In the transtheoretical model, the preparation stage is characterized by the individual's decision that change is not only necessary but that they are ready to take steps towards that change in the near future, usually within the next month. During this stage, individuals often make plans to implement their intended changes, which can include gathering information, setting specific goals, or formulating strategies to achieve those goals. This phase follows contemplation, where the individual is aware of the need for change but has not yet committed to actionable steps. In preparation, the individual has moved beyond just thinking about change and is actively planning for it, indicating a stronger commitment to change. This sets the foundation for action in the subsequent stage, where individuals begin to modify their behavior and practices to achieve their health or lifestyle goals. By distinguishing preparation from other stages like precontemplation, where there is no intention to change, and maintenance, which focuses on sustaining the changes already made, it's clear that preparation is a pivotal point for initiating actual behavioral change.

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://americanboardlifestylemed.examzify.com>

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

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