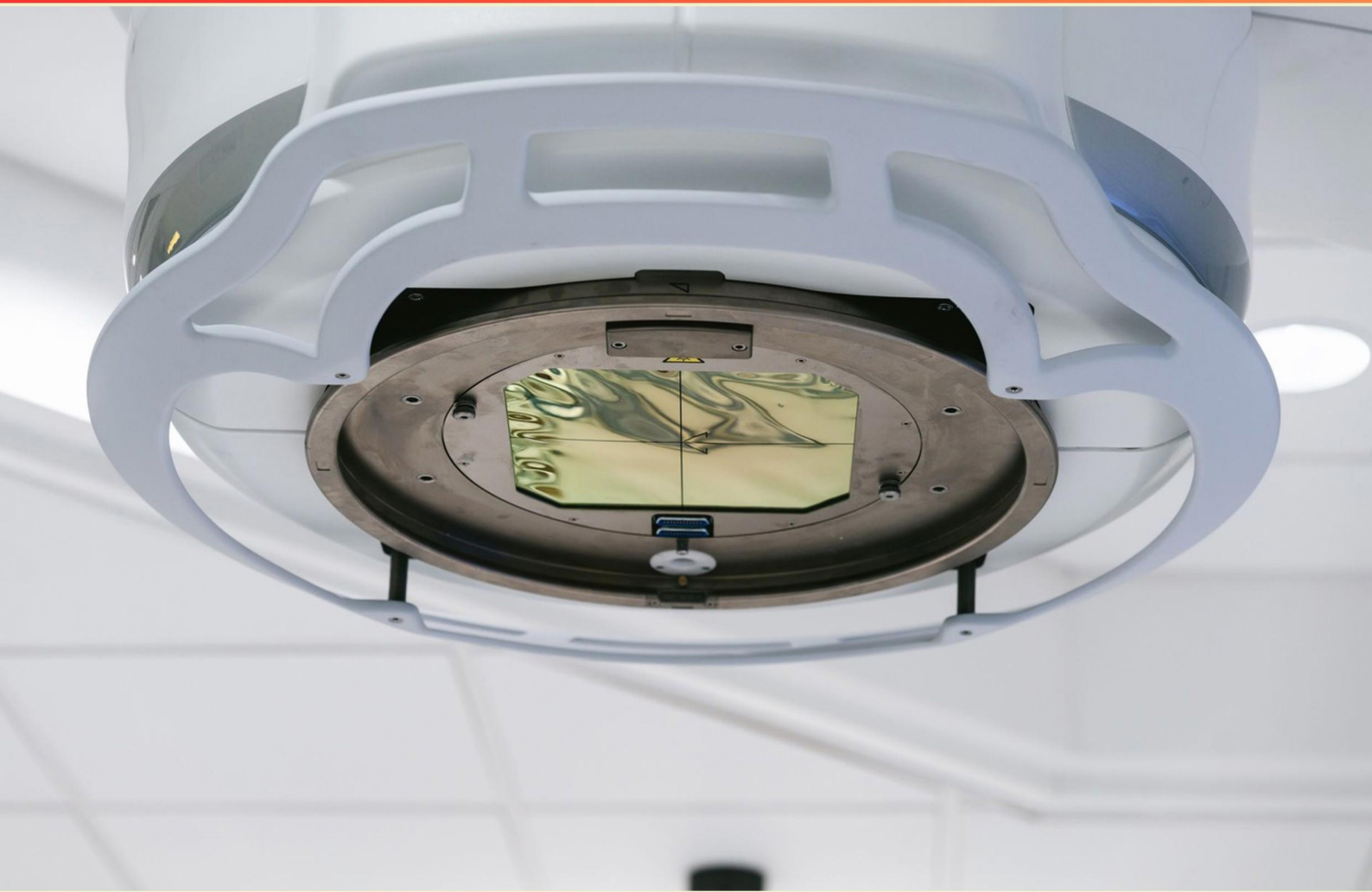


ANGIO AND IR IMAGING PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://angioirimagining.examzify.com>



Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	16

SAMPLE

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

SAMPLE

- 1. Which vascular interventional procedure is used to treat variceal bleeding due to portal hypertension?**
 - A. Endovenous Laser Therapy
 - B. Transjugular Intrahepatic Portosystemic Shunt (TIPS)
 - C. Angioplasty
 - D. Ultrasound-guided sclerotherapy
- 2. How can bleeding complications from interventional radiology procedures be managed?**
 - A. Through relaxation techniques
 - B. By using ice packs
 - C. Through direct pressure, embolization, or surgical intervention if necessary
 - D. By giving oral medications
- 3. IVC delivers blood into which chamber of the heart?**
 - A. Right ventricle
 - B. Right atrium
 - C. Left atrium
 - D. Left ventricle
- 4. What happens to the viscosity of contrast media when it is kept at body temperature?**
 - A. Increases
 - B. Decreases
 - C. Remains the same
 - D. Varies significantly
- 5. Which technique can be used to reduce patient's discomfort during angiography?**
 - A. Administering a contrast agent
 - B. Using a venous access device
 - C. Providing sedation and pain management
 - D. Reducing radiation dose

- 6. During which angiographic procedure is a balloon inflated under controlled pressure?**
- A. Peripheral angiography
 - B. Coronary angiography
 - C. Percutaneous Transluminal Angioplasty
 - D. Abdominal angiography
- 7. Which type of catheter is typically used for lower limb peripheral angiography?**
- A. Pigtail catheter
 - B. Umbrella catheter
 - C. Balloon-tip catheter
 - D. Double-lumen catheter
- 8. What is a therapeutic use of angiography beyond diagnosis?**
- A. Assessment of blood flow
 - B. Treatment of aneurysms through coiling
 - C. Monitoring post-operative outcomes
 - D. Visualization of cardiac structures
- 9. In which scenario would a physician most likely recommend an angiogram?**
- A. To provide a general health check-up
 - B. To assess the blood flow and identify blockages in vessels
 - C. To diagnose a respiratory condition
 - D. To monitor weight loss
- 10. What is the largest branch of each internal carotid artery?**
- A. Anterior cerebral artery
 - B. Middle cerebral artery
 - C. External carotid artery
 - D. Vertebral artery

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. Which vascular interventional procedure is used to treat variceal bleeding due to portal hypertension?

- A. Endovenous Laser Therapy
- B. Transjugular Intrahepatic Portosystemic Shunt (TIPS)**
- C. Angioplasty
- D. Ultrasound-guided sclerotherapy

The Transjugular Intrahepatic Portosystemic Shunt (TIPS) is a specialized vascular interventional procedure specifically designed to treat complications arising from portal hypertension, including variceal bleeding. This procedure involves creating a channel within the liver to connect the portal and systemic venous circulation, thereby reducing pressure in the portal system. In cases of portal hypertension, increased pressure leads to the formation and enlargement of varices, particularly in the esophagus and stomach. These varices pose a significant risk of rupture, leading to potentially life-threatening upper gastrointestinal bleeding. TIPS effectively decreases this pressure, promoting the closure of varices and significantly reducing the risk of bleeding. By providing a direct route for blood to bypass the congested portal system, TIPS not only helps manage acute bleeding episodes but also serves as a long-term treatment by addressing the underlying cause of portal hypertension. This is why TIPS is the preferred interventional procedure for treating variceal bleeding. Other interventions, such as Endovenous Laser Therapy and ultrasound-guided sclerotherapy, focus on different types of venous conditions, and angioplasty usually pertains to arterial stenoses rather than portal hypertension complications. This specificity of TIPS in addressing portal hypertension-related varice

2. How can bleeding complications from interventional radiology procedures be managed?

- A. Through relaxation techniques
- B. By using ice packs
- C. Through direct pressure, embolization, or surgical intervention if necessary**
- D. By giving oral medications

Management of bleeding complications from interventional radiology procedures is crucial to ensure patient safety and minimize morbidity. The correct approach involves direct pressure to control bleeding initially, which is a standard first-aid technique. By applying direct pressure to the site of bleeding, you can often achieve hemostasis effectively. If the bleeding does not stabilize through manual pressure, embolization may be performed. This procedure involves selectively occluding the blood vessels supplying the bleeding site, thus preventing further blood loss. In more severe cases, surgical intervention might be required to address complications that cannot be managed through less invasive means. This comprehensive approach—utilizing direct pressure, followed by embolization or surgical solutions if needed—addresses the immediate need to control bleeding. The ability to adapt the response based on the severity of the situation is critical in managing complications effectively. Other options listed do not adequately address the clinical urgency and medical necessity surrounding bleeding complications in a procedural context.

3. IVC delivers blood into which chamber of the heart?

- A. Right ventricle
- B. Right atrium**
- C. Left atrium
- D. Left ventricle

The inferior vena cava (IVC) is responsible for carrying deoxygenated blood from the lower half of the body back to the heart. It terminates by delivering this blood directly into the right atrium. The right atrium then receives blood from both the IVC and the superior vena cava, which collects blood from the upper body. Once the right atrium is filled, blood moves through the tricuspid valve into the right ventricle, where it is then pumped to the lungs for oxygenation. This process is crucial for maintaining proper circulation and oxygen delivery throughout the body. In summary, the IVC specifically supplies blood to the right atrium, making this the correct answer. The other options do not reflect this anatomy and flow of blood within the heart.

4. What happens to the viscosity of contrast media when it is kept at body temperature?

- A. Increases
- B. Decreases**
- C. Remains the same
- D. Varies significantly

When contrast media is kept at body temperature, its viscosity decreases. This change occurs because most contrast agents are formulated as viscous liquids at room temperature and exhibit reduced viscosity when warmed to body temperature (approximately 37 degrees Celsius). Lower viscosity is advantageous in medical imaging as it enhances the ease of administration through catheters, allows for a smoother flow through blood vessels, and contributes to better imaging quality. The reduction in viscosity at elevated temperatures facilitates quicker contrast distribution within the vascular system and improves the filling of vascular structures, which is critical for effective imaging during procedures like angiography. Maintaining the correct temperature of contrast media is thus essential in clinical practice to ensure optimal performance and to minimize complications during the imaging procedure.

5. Which technique can be used to reduce patient's discomfort during angiography?

- A. Administering a contrast agent
- B. Using a venous access device
- C. Providing sedation and pain management**
- D. Reducing radiation dose

Providing sedation and pain management is an effective technique to reduce a patient's discomfort during angiography. This approach helps to alleviate anxiety and physical discomfort that may arise from both the procedure itself and the potential sensations associated with contrast media administration. Sedation can ensure that the patient remains calm and less aware of the procedure, thereby enhancing their overall experience and comfort level. In addition, appropriate pain management helps to minimize any discomfort the patient may feel during the imaging process, particularly during catheter insertion or the injection of contrast agents. Utilizing this method allows practitioners to create a more tolerable environment for patients, which can be crucial for successful imaging results, as it enables patients to remain still and cooperative throughout the procedure. Other options, while relevant to various aspects of patient care or procedural efficiency, do not specifically address discomfort during angiography in the same direct and impactful way as sedation and pain management do.

6. During which angiographic procedure is a balloon inflated under controlled pressure?

- A. Peripheral angiography
- B. Coronary angiography
- C. Percutaneous Transluminal Angioplasty**
- D. Abdominal angiography

The correct answer relates to Percutaneous Transluminal Angioplasty (PTA), a procedure specifically designed to treat narrowed or obstructed arteries. During PTA, a catheter with a deflated balloon at its tip is advanced to the site of the blockage. Once properly positioned, the balloon is inflated under controlled pressure, which expands the lumen of the artery and restores adequate blood flow. This inflation compresses the plaque against the arterial wall, effectively widening the artery. In contrast, while peripheral and coronary angiography are critical imaging techniques to visualize blood vessels using contrast agents, they do not involve the inflation of a balloon under pressure. Instead, these procedures focus on diagnosing conditions rather than treating them. Abdominal angiography serves a similar diagnostic purpose, allowing visualization of abdominal blood vessels, but does not incorporate the therapeutic aspect of balloon inflation used in angioplasty.

7. Which type of catheter is typically used for lower limb peripheral angiography?

- A. Pigtail catheter**
- B. Umbrella catheter
- C. Balloon-tip catheter
- D. Double-lumen catheter

A pigtail catheter is commonly used for lower limb peripheral angiography due to its unique design, which allows for effective contrast injection and optimal imaging of vascular structures. The curls at the distal end of the catheter help it to remain in place while facilitating efficient contrast flow, enhancing the visualization of blood vessels during the angiographic procedure. This is particularly beneficial in lower limb studies, where clear imaging is essential to assess conditions such as peripheral artery disease. The other types of catheters mentioned do not serve the same purpose or are not as versatile for this specific application. For example, an umbrella catheter is primarily used for procedures related to entrapment or embolization and is not typically employed for routine angiography. Similarly, a balloon-tip catheter is designed for specific interventions, such as balloon angioplasty, rather than general imaging. A double-lumen catheter provides multiple channels for different uses, which can complicate standard imaging procedures that require clear and straightforward contrast delivery. Thus, the pigtail catheter stands out as the optimal choice for lower limb peripheral angiography due to its efficacy and design suited for this purpose.

8. What is a therapeutic use of angiography beyond diagnosis?

- A. Assessment of blood flow
- B. Treatment of aneurysms through coiling**
- C. Monitoring post-operative outcomes
- D. Visualization of cardiac structures

Therapeutic angiography serves multiple functions, and treating aneurysms through coiling is a prime example. In this procedure, a catheter is inserted into the blood vessel and carefully navigated to the site of the aneurysm. Once in position, small coils are deployed into the aneurysm sac. These coils induce thrombosis, meaning they promote the formation of a blood clot within the aneurysm, preventing blood from flowing into it and significantly reducing the risk of rupture. This is a minimally invasive option that can significantly improve patient outcomes by addressing a potentially life-threatening condition. While other options like assessing blood flow, monitoring post-operative outcomes, and visualizing cardiac structures are important aspects of angiography, they are primarily diagnostic or evaluative in nature rather than therapeutic. The ability to intervene and treat conditions such as aneurysms represents a significant advancement in the use of angiography for patient care.

9. In which scenario would a physician most likely recommend an angiogram?

- A. To provide a general health check-up
- B. To assess the blood flow and identify blockages in vessels**
- C. To diagnose a respiratory condition
- D. To monitor weight loss

A physician would most likely recommend an angiogram to assess blood flow and identify blockages in vessels because this procedure is specifically designed to visualize the arteries and veins throughout the body. An angiogram involves injecting a contrast dye into the blood vessels, which allows for detailed imaging through X-rays or other imaging technologies. This diagnostic tool is particularly valuable in determining conditions such as arterial blockages, aneurysms, or vascular malformations. By providing clear images of the blood vessels, an angiogram helps clinicians identify specific areas where blood flow may be compromised, which is crucial for planning further treatment, such as angioplasty or surgery. In contrast, other scenarios such as a general health check-up, diagnosing respiratory conditions, or monitoring weight loss do not typically require an angiogram, as they do not focus on evaluating vascular health or blood flow dynamics.

10. What is the largest branch of each internal carotid artery?

- A. Anterior cerebral artery
- B. Middle cerebral artery**
- C. External carotid artery
- D. Vertebral artery

The largest branch of each internal carotid artery is the middle cerebral artery. This artery supplies a significant portion of the lateral aspect of the cerebral hemisphere, including areas responsible for motor and sensory functions, speech, and higher cognitive processes. The middle cerebral artery's prominence and size stem from its extensive coverage; it serves major territories of the brain, such as the frontal, parietal, and temporal lobes. Because it branches off quite early after the internal carotid artery bifurcates and is responsible for crucial vascular supply to a broad region, it is functionally the most substantial in comparison to other branches. In context, while the anterior cerebral artery is a notable branch, it is smaller in size and supplies a more limited area of the medial frontal and parietal lobes. The external carotid artery is not a branch of the internal carotid; it primarily supplies the face and neck and branches off from the common carotid artery. The vertebral artery, which is part of the posterior circulation, does not branch from the internal carotid artery but rather arises from the subclavian arteries. Thus, in terms of size and anatomical significance, the middle cerebral artery stands out as the largest branch of the internal carotid arteries.

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://angioirimagining.examzify.com>

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

SAMPLE