AQA A-Level PE – Injury Prevention and The Rehabilitation of Injury Practice Test (Sample)

Study Guide

BY EXAMZIFY

Everything you need from our exam experts!

Table of Contents

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. During tissue remodeling, how should rehabilitation progression be adjusted as tensile strength increases?

A. Progression should be delayed until full tissue strength is achieved.

B. As tensile strength increases, progression can be more rapid but still cautious to avoid overload.

C. Progression should ignore tissue remodeling and be based solely on time.

D. Progression should stop until pain disappears.

2. Why is proprioception crucial and what practice improves it after ankle sprains?

A. Proprioception improves joint position sense and dynamic stability; practice with balance/bosu/surface perturbation drills.

B. Proprioception is primarily about visual cues; practice with hand-eye coordination.

C. Proprioception only relates to strength; no practice helps.

D. Proprioception is irrelevant to ankle rehab.

3. Proprioceptive training activities such as balance-board exercises are commonly used for which common joint injury example?

A. Shoulder dislocation.

B. Sprained ankle.

C. ACL rupture.

D. Meniscal tear.

4. In the reparative (remodeling) phase, what is a key rehabilitation focus?

A. Progressive loading, ROM, and neuromuscular training.

B. Complete rest.

C. High-intensity strength training only.

D. No ROM work.

5. What is the role of a sports therapist in the rehabilitation process?

A. Assess injury, plan and supervise rehab, monitor progression, apply treatment, communicate with medical staff, and guide RTS decisions.

B. Only diagnose injuries.

C. Solely prescribe medications.

D. Perform surgical procedures.

6. How does ice bath influence lactic acid clearance after exercise?

A. Lactic acid remains trapped in muscles

B. Lactic acid is cleared by dehydration

C. Lactic acid is dissolved by fat oxidation

D. Lactic acid is removed by increased blood flow after exiting the bath during vasodilation

7. In the described home-based quadriceps rehabilitation, what is the first strengthening modality introduced?

A. Isotonic resistance with heavy weights

B. Passive stretching only

C. Isometric/quadriceps activation

D. Jump squats

8. Which statement correctly distinguishes RICE from POLICE in acute injury management?

A. POLICE replaces Rest with Protection and Optimal Loading; RICE is the more current framework.

B. RICE and POLICE are the same framework.

C. POLICE stands for Protection, Oxygen, Load, Ice; Rest remains unchanged.

D. RICE is older and POLICE is never used.

9. Which description best matches stress fractures?

A. A bone crack caused by overloaded bone after muscle fatigue

B. A joint dislocation

C. A sprain

D. A muscle strain

10. Which statement best describes the overall goal of injury rehabilitation methods described in the material?

A. To increase resting time only.

B. To compensate for lost function with surgery.

C. To restore function through structured rehabilitation including proprioception and strength training.

D. To delay return to activity indefinitely.

Answers

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

Explanations

1. During tissue remodeling, how should rehabilitation progression be adjusted as tensile strength increases?

A. Progression should be delayed until full tissue strength is achieved.

B. As tensile strength increases, progression can be more rapid but still cautious to avoid overload.

C. Progression should ignore tissue remodeling and be based solely on time.

D. Progression should stop until pain disappears.

During tissue remodeling, the collagen in the healing tissue realigns and cross-links gradually, increasing its ability to withstand tension. As this tensile strength improves, the tissue can tolerate higher loads, so rehabilitation can progress more quickly, but it must still be cautious to avoid overload. The guiding idea is loading the tissue in a way it can handle, not just based on time or pain alone, and to advance as strength increases. In practice, you raise the challenge of exercises—more resistance, longer or more complex tasks—toward functional activities as the tissue's tolerance improves, while staying within a pain-free range and watching for signs of overload (increased pain, swelling, or instability). This balanced approach prevents stalling rehabilitation and avoids pushing too hard too soon, which could set back healing.

2. Why is proprioception crucial and what practice improves it after ankle sprains?

A. Proprioception improves joint position sense and dynamic stability; practice with balance/bosu/surface perturbation drills.

B. Proprioception is primarily about visual cues; practice with hand-eye coordination.

C. Proprioception only relates to strength; no practice helps.

D. Proprioception is irrelevant to ankle rehab.

Proprioception is the body's ability to sense where a joint is and how it's moving, and after an ankle sprain this sense is often impaired. That sensory feedback guides how the ankle stabilizes the leg during movement, so restoring it helps re-establish dynamic stability and lowers the risk of re-injury. The best way to improve proprioception is through practice that challenges the ankle's sense of position and its automatic motor responses under unstable conditions. Balance activities on unstable surfaces, such as a Bosu or wobble board, plus surface perturbations, force the ankle to detect small changes and react quickly with the correct muscle activation. This retrains the neuromuscular pathways to maintain proper alignment during movement and sport. Progressions can include performing tasks with eyes closed, increasing single-leg balance time, adding movement or perturbations, and incorporating sport-specific drills. Visual cues aren't the primary driver of proprioception, and training with only hand-eye coordination doesn't target the sensory feedback and automatic control involved. Proprioception isn't simply about strength, and it plays a central role in ankle rehab as part of neuromuscular control.

3. Proprioceptive training activities such as balance-board exercises are commonly used for which common joint injury example?

A. Shoulder dislocation.

B. Sprained ankle.

C. ACL rupture.

D. Meniscal tear.

Proprioceptive training focuses on retraining the body's sense of joint position and how the muscles respond to maintain stability after injury. Balance-board exercises challenge the ankle's sense of position and require quick, controlled muscle adjustments to keep balance, rebuilding neuromuscular control around the joint. This approach is especially common after a sprained ankle because the ankle ligaments contain many sensors that influence balance, and such injuries are very common in sport. Restoring proprioception helps reduce the risk of re-injury and supports a safe return to activity. While proprioceptive work is useful after ACL tears and shoulder injuries too, balance-board style rehab is most classically associated with recovering from an ankle sprain.

4. In the reparative (remodeling) phase, what is a key rehabilitation focus?

A. Progressive loading, ROM, and neuromuscular training.

B. Complete rest.

C. High-intensity strength training only.

D. No ROM work.

In the reparative (remodeling) phase, the rehab goal is to gradually load the healing tissue while restoring movement and how the body re-uses and controls movement. Progressive loading helps the new collagen fibers realign along the lines of stress, increasing tensile strength and durability as the tissue matures. Keeping range of motion available prevents stiffness and preserves joint and soft-tissue mobility, which is essential for normal function. Neuromuscular training re-educates muscle activation patterns and proprioception so you can control movements safely and effectively again, reducing the risk of re-injury as demands return to sport or daily activities. Resting completely would slow the remodeling process and limit gains in strength and function. High-intensity strength work too soon can overload the healing tissue, delaying recovery or causing setbacks. Avoiding ROM work leads to stiffness and poor joint function.

5. What is the role of a sports therapist in the rehabilitation process?

A. Assess injury, plan and supervise rehab, monitor progression, apply treatment, communicate with medical staff, and guide RTS decisions.

B. Only diagnose injuries.

C. Solely prescribe medications.

D. Perform surgical procedures.

The main concept being tested is the scope of a sports therapist's role in rehabilitation, which covers managing the entire rehab process rather than just one aspect. They assess the injury and functional limitations, plan a progressive rehabilitation programme, supervise sessions, monitor progression with objective criteria, apply appropriate treatment techniques, communicate with other medical staff, and guide decisions about when the athlete can safely return to sport. This integrated approach ensures tissue healing is matched with functional recovery and sport-specific loading, so the athlete is truly ready to resume activity. Other options don't fit because diagnosing injuries is typically the domain of medical professionals, prescribing medications is outside a sports therapist's scope, and performing surgical procedures is not part of their role.

6. How does ice bath influence lactic acid clearance after exercise?

A. Lactic acid remains trapped in muscles

B. Lactic acid is cleared by dehydration

C. Lactic acid is dissolved by fat oxidation

D. Lactic acid is removed by increased blood flow after exiting the bath during vasodilation

Lactate clearance after exercise mainly depends on blood flow carrying lactate away from the muscles to organs like the liver for processing. When you're in an ice bath, the cold causes blood vessels to narrow (vasoconstriction), reducing immediate blood flow to the muscles. But once you get out and the area warms up, the vessels dilate again (vasodilation), increasing blood flow. This boost in circulation helps move lactate out of the working muscles more quickly, aiding its removal from the tissue. That's why the option describing removal by increased blood flow after exiting the bath during vasodilation fits best. The other ideas don't reflect how lactate is actually cleared: dehydration doesn't actively eliminate lactate, fat oxidation isn't the mechanism for dissolving it, and lactate isn't simply trapped in muscle tissue.

7. In the described home-based quadriceps rehabilitation, what is the first strengthening modality introduced?

A. Isotonic resistance with heavy weights

B. Passive stretching only

C. Isometric/quadriceps activation

D. Jump squats

The first strengthening approach is to activate the quadriceps with isometric contractions. In rehab, you want to wake the muscle up and retrain its firing without moving the knee joint or loading healing tissues. Isometric/quadriceps activation lets you tense the muscle in place (think quad sets or short-arc contractions at a gentle knee angle) to improve neuromuscular control, reduce inhibition, and begin rebuilding strength safely within a home setting. Why this fits first: it protects healing tissue by avoiding joint movement and heavy loads while still promoting muscle engagement. It also doesn't require equipment and can be done early in rehab. Why the other options aren't suitable as the first strengthening step: heavy isotonic resistance would stress the healing tissues with dynamic movement and higher loads, which isn't appropriate early on. Passive stretching alone strengthens nothing and won't rebuild muscle strength. Jump squats are high-impact plyometrics that require substantial strength and control; they're too demanding at the outset and could provoke pain or re-injury.

8. Which statement correctly distinguishes RICE from POLICE in acute injury management?

A. POLICE replaces Rest with Protection and Optimal Loading; RICE is the more current framework.

B. RICE and POLICE are the same framework.

C. POLICE stands for Protection, Oxygen, Load, Ice; Rest remains unchanged.

D. RICE is older and POLICE is never used.

RICE and POLICE are related approaches, but they're not the same. RICE uses Rest, Ice, Compression, and Elevation to limit swelling and pain in the early stage of an injury. The idea is to minimize tissue stress by resting the area and then manage symptoms with cold, compression, and elevation. POLICE updates this by keeping Ice, Compression, and Elevation, but changing Rest to Protection and adding Optimal Loading. Protection means shielding the injured tissue from movements or loads that could cause further damage, especially in the very early phase. Optimal Loading brings in controlled, graded loading (gentle, progressive exercises) to stimulate healing, maintain range of motion, and prevent weakness and stiffness without overdoing it. So the key difference is replacing Rest with Protection and Introducing a planned loading strategy. That's why POLICE is considered a refined approach compared with RICE, rather than them being identical.

9. Which description best matches stress fractures?

A. A bone crack caused by overloaded bone after muscle fatigue

B. A joint dislocation

C. A sprain

D. A muscle strain

Stress fractures happen when a bone experiences repetitive loading that builds up faster than it can repair, especially once muscles are fatigued and grip or shock absorption declines. When the muscles tire, they don't cushion impacts as well, so more force is transmitted to the bone, causing tiny cracks to form over time. The description that best fits this is a bone crack caused by overloaded bone after muscle fatigue. The other options describe different injuries: a joint dislocation is when bones at a joint come out of alignment; a sprain is an injury to ligaments; a muscle strain is a tear or overstretch of muscle tissue.

10. Which statement best describes the overall goal of injury rehabilitation methods described in the material?

A. To increase resting time only.

B. To compensate for lost function with surgery.

C. To restore function through structured rehabilitation including proprioception and strength training.

D. To delay return to activity indefinitely.

The goal of injury rehabilitation is to restore function through a structured, progressive program that rebuilds neuromuscular control and strength. A well-designed rehab plan guides the body from initial healing to full function, gradually increasing load and complexity as healing allows. Proprioception training helps re-educate joint position sense and balance, which improves stability and reduces re-injury risk. Strength work rebuilds muscle capacity and tendon resilience, supporting functional and sport-specific movements. This approach addresses both the mechanical and control aspects of movement, ensuring a safe and effective return to activity. Resting alone won't restore function, and surgery is not the general aim of rehab (it may be part of treatment in some cases, but rehab itself focuses on regaining function). Delaying return indefinitely contradicts the purpose of rehab, which is to prepare the body for gradual, criteria-based return to desired activities.

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://aqaalevelpeinjuryprevrehab.examzify.com

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