

AQA A-LEVEL PE – INJURY PREVENTION AND THE REHABILITATION OF INJURY PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED 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. 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. In tendon rehabilitation, what effect does graded loading have on symptom flare risk?**
 - A. It increases flare risk
 - B. It reduces risk of symptom flare
 - C. It has no effect
 - D. It eliminates flares completely
- 2. Which phase of tissue healing follows inflammation?**
 - A. Hemostasis
 - B. Regeneration
 - C. Proliferation (repair)
 - D. Remodeling
- 3. What is the role of conditioning in injury prevention, and which qualities are most relevant?**
 - A. Builds resilience against injury; relevant qualities include strength, power, balance, proprioception, and flexibility.
 - B. Increases fatigue and injury risk.
 - C. Only endurance matters.
 - D. Conditioning is irrelevant.
- 4. How can psychological readiness be integrated into return-to-sport decisions?**
 - A. Use psychological readiness measures, gradual exposure to sport tasks, and consider confidence and fear as part of progression.
 - B. Ignore psychological factors.
 - C. Return to sport based on biomechanical metrics alone.
 - D. Rely solely on medical clearance.
- 5. Which statement is true about an ice bath as a recovery method?**
 - A. Involves sitting in ice-cold water for 5-10 minutes, causes vasoconstriction, reduces swelling and aids recovery.
 - B. Involves sitting in warm water for 5-10 minutes.
 - C. It increases swelling and tissue breakdown.
 - D. It has no effect on recovery.

- 6. Name two protective devices used in injury prevention and explain when they are suitable.**
- A. Tape and ankle braces; suitable for instability or movement limitation during high-risk activities; chosen based on sport, evidence, and fit.
 - B. Sunglasses and hat.
 - C. Knee braces for upper leg.
 - D. Shoes with high heels.
- 7. After leaving an ice bath, what happens to blood flow?**
- A. Vasoconstriction continues decreasing blood flow
 - B. Vasodilation increases blood flow and oxygen delivery to muscles
 - C. Blood flow remains unchanged
 - D. Blood flow stops temporarily
- 8. Name the three phases of tissue healing.**
- A. Hemostasis, Inflammation, and Regeneration
 - B. Inflammation, Proliferation (Repair), and Remodelling (Maturation)
 - C. Inflammation, Necrosis, and Scarring
 - D. Proliferation, Inflammation, and Remodeling
- 9. What is proprioception and why is it essential in rehabilitation?**
- A. Proprioception is the sense of joint position and movement; essential for neuromuscular control to prevent re-injury and restore stability.
 - B. Only sense of touch
 - C. Vision-based balance
 - D. Heart rate feedback
- 10. During rehab progression, why might cross-training be used during early return-to-sport stages?**
- A. Maintain overall fitness while reducing stress on injured tissue
 - B. Increase tissue stress to speed recovery
 - C. Replace sport-specific practice entirely
 - D. Prolong rest to prevent any load

Answers

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

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Explanations

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1. In tendon rehabilitation, what effect does graded loading have on symptom flare risk?

- A. It increases flare risk
- B. It reduces risk of symptom flare**
- C. It has no effect
- D. It eliminates flares completely

Graded loading helps tendon rehab by using a cautious, progressive increase in mechanical load to stimulate the tendon's adaptation without provoking a flare. Tendons respond to loading by remodeling their collagen and increasing capacity, but sudden or large increases in load can overwhelm the tissue, causing micro-damage and a rise in pain or symptoms. By starting with light, tolerable loads and gradually upping intensity, duration, and frequency while closely watching symptoms, you promote strengthening and better tendon tolerance. This controlled progression reduces the likelihood of a symptom flare during the rehab process. It's not about guaranteeing zero flares—occasional minor flare can occur if overload happens—but the overall risk is lowered when the load is systematically increased within the patient's pain tolerance.

2. Which phase of tissue healing follows inflammation?

- A. Hemostasis
- B. Regeneration
- C. Proliferation (repair)**
- D. Remodeling

The main idea is understanding the sequence of tissue healing after injury. After the initial inflammatory response, the body moves into the repair phase, known as proliferation. During this phase, the wound is rebuilt: fibroblasts lay down collagen and other extracellular matrix, new blood vessels form to restore circulation (angiogenesis), and granulation tissue develops. Epithelial cells migrate across the wound to reestablish the skin barrier, and the wound may contract to close the gap. This sets the stage for the remodeling phase, where the tissue is reorganized and strengthened over time. So the phase that follows inflammation is proliferation (repair) because it focuses on rebuilding and filling the defect, rather than stopping bleeding or simply reorganizing tissue later on. Hemostasis occurs immediately to stop bleeding, and remodeling comes even after the proliferative repair, refining tissue strength. Regeneration can occur in some tissues but is not the primary ongoing phase immediately after inflammation in this context.

3. What is the role of conditioning in injury prevention, and which qualities are most relevant?

- A. Builds resilience against injury; relevant qualities include strength, power, balance, proprioception, and flexibility.
- B. Increases fatigue and injury risk.
- C. Only endurance matters.
- D. Conditioning is irrelevant.

Conditioning prepares the body to meet the demands of sport, increasing tissue tolerance and neuromuscular control so the joints and muscles can handle loads, sudden changes in direction, and fatigue without breaking down. The most relevant qualities are strength, which gives the muscles and connective tissues the capacity to bear forces; power, which enables rapid force production for safe accelerations, decelerations, and changes of direction; balance and proprioception, which help the body sense joint positions and maintain stable alignment under fatigue or on unsteady surfaces; and flexibility, which allows movements to occur through their natural range without placing excessive strain on tissues. Together, these aspects promote safer movement patterns, better control, and quicker neuromuscular responses, all of which reduce injury risk. A well-designed conditioning program should be progressive and sport-specific, include neuromuscular and plyometric work, and emphasize adequate recovery. Endurance is only one piece of the puzzle, and focusing solely on it would miss the other protective qualities that matter for injury prevention.

4. How can psychological readiness be integrated into return-to-sport decisions?

- A. Use psychological readiness measures, gradual exposure to sport tasks, and consider confidence and fear as part of progression.
- B. Ignore psychological factors.
- C. Return to sport based on biomechanical metrics alone.
- D. Rely solely on medical clearance.

Psychological readiness affects how an athlete moves, loads tissue, and handles stress when they return to sport. The best approach is to assess mental factors such as confidence, fear of re-injury, and motivation and to weave these into the progression plan. By using psychological readiness measures, clinicians can identify areas of worry or a lack of trust in the injured area. Pairing this with a graded exposure to sport tasks—starting with low-demand drills and gradually increasing in complexity and intensity—helps the athlete rebuild confidence and reduce fear. Crucially, progression criteria should include psychological milestones alongside physical ones, so decisions reflect both minds and bodies. Why this works better than the others: simply ignoring psychological factors misses a key driver of recovery and return performance. Basing return on biomechanical metrics alone can overlook fear, anxiety, or low confidence that may cause compensatory patterns or avoidance under sport stress. Relying only on medical clearance ignores how the athlete feels about returning and their ability to cope with competition demands.

5. Which statement is true about an ice bath as a recovery method?

- A. Involves sitting in ice-cold water for 5-10 minutes, causes vasoconstriction, reduces swelling and aids recovery.**
- B. Involves sitting in warm water for 5-10 minutes.
- C. It increases swelling and tissue breakdown.
- D. It has no effect on recovery.

Cold water immersion aids recovery mainly through vasoconstriction. When you sit in ice-cold water for a short period, blood vessels constrict, which reduces blood flow to the injured area, helps limit swelling and edema, and lowers metabolic demand in the tissues. This combination can lessen inflammation and soreness and can speed up the return toward normal function. The statement that describes sitting in ice-cold water for about 5-10 minutes, causing vasoconstriction, reducing swelling, and aiding recovery, best captures how this method works in practice. Warm water would have the opposite effect, promoting vasodilation and potentially increasing swelling rather than reducing it. Saying ice baths increase swelling or tissue breakdown isn't consistent with how cooling is used for recovery, and claiming there's no effect on recovery ignores the physiological reasons cold immersion is used to manage inflammation and discomfort.

6. Name two protective devices used in injury prevention and explain when they are suitable.

- A. Tape and ankle braces; suitable for instability or movement limitation during high-risk activities; chosen based on sport, evidence, and fit.**
- B. Sunglasses and hat.
- C. Knee braces for upper leg.
- D. Shoes with high heels.

External protective devices help prevent injuries by stabilising joints and guiding movement during high risk activities. Tape and ankle braces provide external support to the ankle, helping to limit excessive movement (like inversion) and give proprioceptive feedback that helps the athlete adapt how they move. They're especially useful when there is instability or a movement limitation, such as returning to sport after an ankle sprain or during activities with frequent cutting, jumping, or rapid changes of direction. The best choice depends on the sport's demands, the evidence supporting the device, and how well it fits and feels for the wearer. Tape is often used for short term support or during rehab when skilled application is available, while an ankle brace offers ongoing support with potentially greater ease of use and comfort for some athletes. Other options aren't typical protective measures for this purpose: sunglasses and a hat protect from sun and debris rather than joint injuries in sport; a knee brace aimed at the upper leg isn't addressing the same protective need; shoes with high heels can increase injury risk rather than prevent it.

7. After leaving an ice bath, what happens to blood flow?

- A. Vasoconstriction continues decreasing blood flow
- B. Vasodilation increases blood flow and oxygen delivery to muscles**
- C. Blood flow remains unchanged
- D. Blood flow stops temporarily

When you step out of an ice bath, the vessels experience a rebound effect: the cooling caused vasoconstriction during icing, and as the tissues warm, the smooth muscle in the vessel walls relaxes and the vessels dilate. This vasodilation increases blood flow to the muscles, delivering more oxygen and nutrients and helping to remove waste products. This boost in circulation supports recovery and reduces stiffness after cold exposure. The other ideas don't fit because the body doesn't maintain constricted flow after warming, nor does flow stay the same or stop; it increases to meet the tissues' needs.

8. Name the three phases of tissue healing.

- A. Hemostasis, Inflammation, and Regeneration
- B. Inflammation, Proliferation (Repair), and Remodelling (Maturation)**
- C. Inflammation, Necrosis, and Scarring
- D. Proliferation, Inflammation, and Remodeling

The three phases of tissue healing are inflammation, proliferation (repair), and remodelling (maturation). After injury, inflammation starts to control bleeding and prevent infection, paving the way for new tissue formation. During proliferation, new tissue is built—fibroblasts lay down collagen, new blood vessels form, and granulation tissue and epithelial layers develop. In the final remodelling phase, the new tissue is reorganized and strengthened over time, with collagen realigned along stress lines and scar tissue maturation continuing for weeks to months. This sequence is the standard framework for healing, and the other options mix in phases that aren't part of the classic three-phase model or place them in the wrong order.

9. What is proprioception and why is it essential in rehabilitation?

- A. Proprioception is the sense of joint position and movement; essential for neuromuscular control to prevent re-injury and restore stability.**
- B. Only sense of touch
- C. Vision-based balance
- D. Heart rate feedback

Proprioception is the sense that tells you where your joints are and how they're moving, provided by receptors in muscles, tendons, ligaments, and joint capsules. This internal feedback feeds the nervous system to control muscles and maintain joint stability, especially during dynamic tasks. In rehabilitation, retraining proprioception helps the body regain accurate joint position sense and timely muscle activation, so stabilizing muscles respond appropriately to perturbations. That improved neuromuscular control reduces the likelihood of abnormal joint movement that could re-injure tissues and supports returning to safe, confident movement. For example, after an ankle sprain, balance and perturbation training on stable and then unstable surfaces helps restore this sense and strengthen the reflexive responses needed to prevent future injuries. The other options describe different senses—touch, vision-based balance, or heart rate feedback—that don't capture the joint position and movement sense central to proprioception.

10. During rehab progression, why might cross-training be used during early return-to-sport stages?

- A. Maintain overall fitness while reducing stress on injured tissue**
- B. Increase tissue stress to speed recovery
- C. Replace sport-specific practice entirely
- D. Prolong rest to prevent any load

The main idea is using controlled, varied loading to progress rehab without overloading the injured area. Cross-training in the early return-to-sport stages keeps overall fitness, endurance, and neuromuscular control building, while avoiding the high stress that direct sport-specific loads would place on the healing tissue. This helps prevent deconditioning and supports healing by maintaining cardiovascular health and muscle function, so when the tissue is ready, a smoother, safer transition back to sport-specific activities can occur. Restating why this is the best approach: you want to preserve fitness and function without forcing the injured tissue to bear the full repetitive stress too soon. Doing more load too early can slow healing or cause setbacks, while cross-training provides a safe way to stay conditioned. Replacing sport-specific practice entirely or prolonging rest defeats the goal of progressive loading, and deliberately increasing tissue stress too soon counteracts the healing process.

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!

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