

Arthroplasty IOT Training Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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	15

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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 turnaround time to get a SD callibrator?**
 - A. 24 hours**
 - B. 48 hours**
 - C. 72 hours**
 - D. 1 week**

- 2. Which nerve innervates the deltoid?**
 - A. Median nerve**
 - B. Radial nerve**
 - C. Axillary nerve**
 - D. Musculocutaneous nerve**

- 3. Is it true that vaultlock glenoid has a different radius of curvature than standard glenoid components?**
 - A. True**
 - B. False**
 - C. Not specified**
 - D. Not applicable**

- 4. Which statement about vaultlock and standard glenoid components is true?**
 - A. The radius of curvature differs between vaultlock and standard glenoid components**
 - B. The radius of curvature is the same**
 - C. Vaultlock uses no central peg**
 - D. Vaultlock trial components are identical to standard**

- 5. Are all Univers Revers Glenosphere sizes available in concentric, 3.5 inferior, and +4 offset?**
 - A. True**
 - B. False**
 - C. Not all sizes have these offsets**
 - D. Only some sizes offer +4 offset**

- 6. RTSA stands for which procedure?**
- A. Rotator Cuff Repair Arthroplasty**
 - B. Reverse Total Shoulder Arthroplasty**
 - C. Radial Tunnel Approach**
 - D. Rib Fracture Stabilization**
- 7. True or False: The Univers II and Apex stems allow for +/- 10 degrees of version correction.**
- A. True**
 - B. False**
 - C. Cannot be determined**
 - D. Not applicable**
- 8. Insertion site for Subscapularis?**
- A. Lesser Tuberosity**
 - B. Greater Tuberosity**
 - C. Acromion**
 - D. Coracoid Process**
- 9. Which scenario would most likely disqualify a proximal humerus fracture from percutaneous pinning?**
- A. 2-part fracture**
 - B. 3-part fracture**
 - C. High likelihood of AVN**
 - D. Low likelihood of AVN**
- 10. During explanting Univers II or Apex, is it necessary to remove both inferior and superior screws to disengage from the stem?**
- A. No**
 - B. Yes**
 - C. Only inferior screws**
 - D. Only superior screws**

Answers

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

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Explanations

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1. What is the turnaround time to get a SD callibrator?

- A. 24 hours
- B. 48 hours**
- C. 72 hours
- D. 1 week

The key idea is that calibration jobs need time for proper checks, documentation, and safe return of the device. Forty-eight hours is the standard service level because it gives the calibration team enough time to receive the unit, perform the calibration and validation with traceable records, and ship it back without rushing quality checks. Shorter timelines, like 24 hours, risk incomplete QA and missing documentation, while longer timelines, such as 72 hours or a week, cause unnecessary downtime for equipment that needs regular calibration. So, 48 hours hits a practical balance between accuracy, traceability, and turnaround efficiency.

2. Which nerve innervates the deltoid?

- A. Median nerve
- B. Radial nerve
- C. Axillary nerve**
- D. Musculocutaneous nerve

The nerve that innervates the deltoid is the axillary nerve. It arises from the posterior cord of the brachial plexus (C5-C6) and travels through the quadrangular space to reach the deltoid muscle, also supplying the teres minor. This explains why weakness of shoulder abduction and numbness over the lateral shoulder can occur with axillary nerve issues. The other nerves listed supply different regions: the median nerve mainly flexes forearm muscles and some hand muscles, the radial nerve supplies the posterior arm/forearm extensors, and the musculocutaneous nerve supplies the anterior arm flexors.

3. Is it true that vaultlock glenoid has a different radius of curvature than standard glenoid components?

- A. True**
- B. False
- C. Not specified
- D. Not applicable

The radius of curvature of a glenoid component directly affects how the joint surfaces contact and move together. Vaultlock glenoid designs alter this curvature compared with standard glenoids to accommodate the locking mechanism and to optimize fixation, contact area, and load distribution. This intentional change helps improve stability and minimize edge loading across motion, so it is true that vaultlock glenoid has a different radius of curvature than standard components.

4. Which statement about vaultlock and standard glenoid components is true?

A. The radius of curvature differs between vaultlock and standard glenoid components

B. The radius of curvature is the same

C. Vaultlock uses no central peg

D. Vaultlock trial components are identical to standard

The key idea is how glenoid geometry affects articulation. The radius of curvature (how curved the glenoid surface is) determines how the humeral head sits and moves against the glenoid component. VaultLock is a distinct glenoid design with its own locking interface and seating geometry, and this design requires a different curvature from standard glenoids to preserve smooth articulation and distribute loads properly. Because the VaultLock and standard glenoids are not identical in how they curve, their radii of curvature are not the same. That's why the statement about their different radii is true.

5. Are all Univers Revers Glenosphere sizes available in concentric, 3.5 inferior, and +4 offset?

A. True

B. False

C. Not all sizes have these offsets

D. Only some sizes offer +4 offset

In reverse shoulder arthroplasty, offset options change where the center of rotation sits relative to the baseplate, which affects deltoid tension, ROM, and potential impingement. The Univers Revers Glenosphere line is designed so that every diameter size is available with all three offset configurations: concentric (no offset), a 3.5 mm inferior offset (lowering the center of rotation to improve inferior overhang and reduce scapular notching), and a +4 mm offset (lateralizing the center to tweak tension and ROM). Because these offsets are offered across the entire size range, any glenosphere size can be chosen with any of these offsets. That's why the statement is true.

6. RTSA stands for which procedure?

A. Rotator Cuff Repair Arthroplasty

B. Reverse Total Shoulder Arthroplasty

C. Radial Tunnel Approach

D. Rib Fracture Stabilization

RTSA refers to a shoulder arthroplasty that reverses the normal ball-and-socket arrangement. In this design, a ball is placed on the glenoid side (glenosphere) and a socket on the humeral side, which changes the mechanics so the deltoid can lift the arm effectively even when the rotator cuff is damaged or torn. This configuration commonly restores elevation and function in cuff-tear arthropathy or when a conventional shoulder replacement isn't feasible. The other options describe different procedures: one implies a rotator cuff repair concept paired with arthroplasty, another is an elbow approach for nerve issues, and the last is stabilization of rib fractures—none of which match the reverse shoulder design.

7. True or False: The Univers II and Apex stems allow for +/- 10 degrees of version correction.

A. True

B. False

C. Cannot be determined

D. Not applicable

Version is the rotational alignment of the femoral component around the long axis. Getting the right version, together with the acetabular cup, helps prevent impingement and dislocation and optimizes hip stability. The Univers II and Apex stems are modular designs that permit intraoperative fine-tuning of this rotation. By using a rotating neck or sleeve interface, the surgeon can adjust the final femoral version by about ten degrees in either direction before final locking. This capability provides flexibility to match the patient's anatomy and achieve the desired combined anteversion without changing leg length or offset. Because non-modular stems fix the version, having a ± 10 -degree adjustment is a feature specific to these designs, making the statement true.

8. Insertion site for Subscapularis?

A. Lesser Tuberosity

B. Greater Tuberosity

C. Acromion

D. Coracoid Process

Subscapularis attaches to the lesser tuberosity of the humerus. This location matches its role as the primary internal rotator of the shoulder and anterior stabilizer of the glenohumeral joint. The greater tuberosity is for the supraspinatus, infraspinatus, and teres minor, which pull on the lateral/posterior aspect of the humeral head. The acromion and coracoid process are parts of the scapula, not tendon insertions for the subscapularis. So the lesser tuberosity is the correct insertion site.

9. Which scenario would most likely disqualify a proximal humerus fracture from percutaneous pinning?

A. 2-part fracture

B. 3-part fracture

C. High likelihood of AVN

D. Low likelihood of AVN

The key idea is that the viability of the humeral head drives how you fix a proximal humerus fracture. If the blood supply to the humeral head is at high risk of being lost, fixing the bone with percutaneous pins is unlikely to give a durable, functional result because the head is prone to avascular necrosis and collapse after healing. In fractures where the pattern disrupts the blood supply—typically more complex injuries with articular involvement or four-part fractures—the head's tissue may already be necrotic or doomed to necrosis regardless of fixation. In such cases, replacing the joint (hemiarthroplasty or reverse shoulder, as appropriate) is a better plan than pinning, which would not address the underlying issue and could fail. Two-part fractures are often suitable for pinning when there's enough stability and the blood supply remains intact, and even many three-part fractures can be treated with fixation if vascularity is preserved. A low likelihood of AVN would not preclude pinning.

10. During explanting Univers II or Apex, is it necessary to remove both inferior and superior screws to disengage from the stem?

A. No

B. Yes

C. Only inferior screws

D. Only superior screws

Think of the Univers II and Apex implants as having a neck that locks to the stem with locking screws. To disengage the neck from the stem, you only need to release that locking mechanism by removing the screws that cross-lock the neck to the stem. You do not have to take out both the inferior and superior screws to separate the components. Once the locking screws are removed, the neck and stem can be separated with gentle distraction and controlled manipulation. The remaining screws aren't required for the disassembly, though you would address any bone in-growth or debris as part of the overall explant technique.

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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://arthroplastiotraining.examzify.com>

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

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