

# ASRT Student Exam Assessment Library (SEAL) Practice Exam (Sample)

## Study Guide



**Everything you need from our exam experts!**

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# Table of Contents

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

# 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. What is the CT, or Hounsfield, number for fat?**
  - A. -50**
  - B. -100**
  - C. 0**
  - D. 50**
- 2. Which of the following is NOT a common metastatic route for Acute Lymphocytic Leukemia (ALL)?**
  - A. Lymph nodes**
  - B. Liver**
  - C. Spleen**
  - D. Kidneys**
- 3. Who introduced the stages of grief including denial, anger, bargaining, depression, and acceptance?**
  - A. Maslow**
  - B. Kubler-Ross**
  - C. Kinsey**
  - D. Karnofsky**
- 4. According to NCRP Report No. 91, what is the recommended acceptable limit for occupational exposure to radiation?**
  - A. 2 rem/year**
  - B. 5 rem/year**
  - C. 10 rem/year**
  - D. 15 rem/year**
- 5. The term used for a patient's right to decide their medical treatment is known as patient what?**
  - A. Advocacy**
  - B. Autonomy**
  - C. Consent**
  - D. Confidentiality**

- 6. Before proceeding with treatment, what is essential if the therapy table is out of tolerance?**
- A. Adjust the table settings**
  - B. Report it to a supervisor**
  - C. Pause treatment and assess patient safety**
  - D. Continue with the procedure**
- 7. What does PACS stand for in the context of imaging departments?**
- A. Patient Archive Communication System**
  - B. Picture Analysis and Clinical Service**
  - C. Picture Archiving and Communication System**
  - D. Professional Archive for Consulting Specialists**
- 8. The grainy appearance of a CT image is known as:**
- A. Image blur**
  - B. Image noise**
  - C. Image resolution**
  - D. Image distortion**
- 9. What is the primary function of thoracostomy tubes?**
- A. To deliver chemotherapy drugs**
  - B. To drain the intrapleural space and mediastinum**
  - C. To monitor radiation exposure**
  - D. To provide supplemental oxygen**
- 10. What role does the detector array play in a CT scan?**
- A. To emit photons**
  - B. To absorb radiation**
  - C. To convert light to sound**
  - D. To interpret signals**



## **Answers**

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

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## **Explanations**

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**1. What is the CT, or Hounsfield, number for fat?**

- A. -50
- B. -100**
- C. 0
- D. 50

The correct Hounsfield unit for fat is typically around -100. Hounsfield units are a scale for measuring radiodensity, which is the ability of a substance to attenuate X-rays. On this scale, air is represented as -1000, water is 0, and fat, being less dense than water, appears as a negative number. Fat has a lower density compared to water, which is why it is a negative value on the Hounsfield scale. It is important to understand that these values help in differentiating various tissues and substances during CT imaging. The value of around -100 provides a specific reference point for radiologists when interpreting scans, allowing for accurate assessments of body composition and identifying pathological conditions.

**2. Which of the following is NOT a common metastatic route for Acute Lymphocytic Leukemia (ALL)?**

- A. Lymph nodes
- B. Liver
- C. Spleen
- D. Kidneys**

Acute Lymphocytic Leukemia (ALL) primarily spreads through the blood and typically involves the bone marrow, lymphatic system, and various organs. Common sites for metastasis in ALL include lymph nodes, liver, and spleen, as these sites are part of the body's lymphatic and hematologic systems. The kidneys, while they can be involved in other malignancies, are not a common site for the metastasis of ALL. The disease usually manifests through an accumulation of lymphoblasts in the bone marrow and can lead to infiltration in organs with lymphatic tissues. The other options, being lymphatic-associated structures, facilitate the progression of leukemic cells, making them much more likely to be involved in the disease's spread. Thus, kidneys are not typically affected in this context, reinforcing the selection of this option as the one that does not fit the common metastatic pattern of ALL.

**3. Who introduced the stages of grief including denial, anger, bargaining, depression, and acceptance?**

**A. Maslow**

**B. Kubler-Ross**

**C. Kinsey**

**D. Karnofsky**

The stages of grief, which include denial, anger, bargaining, depression, and acceptance, were introduced by Elisabeth Kübler-Ross. Her model, often referred to as the Kübler-Ross model, was developed to describe the emotional response that individuals go through when facing terminal illness or significant loss. This framework has since been widely applied to various types of grief and loss experiences beyond death, including the loss of relationships or significant life changes. Kübler-Ross emphasized that these stages are not necessarily linear and that individuals might move back and forth between them as they cope with their grief. Her work has had a profound impact on psychology and counseling, providing insight into the emotional processes that accompany loss and enabling caregivers and healthcare professionals to better understand and support those experiencing grief. In contrast, the other individuals mentioned in the answer choices—Maslow, Kinsey, and Karnofsky—are recognized for their contributions in different fields such as psychology, human sexuality, and oncology, but none are associated with the development of the stages of grief framework.

**4. According to NCRP Report No. 91, what is the recommended acceptable limit for occupational exposure to radiation?**

**A. 2 rem/year**

**B. 5 rem/year**

**C. 10 rem/year**

**D. 15 rem/year**

The recommended acceptable limit for occupational exposure to radiation, as outlined in NCRP Report No. 91, is indeed 5 rem per year. This recommendation is grounded in extensive research and aims to ensure the safety of workers exposed to radiation in various environments, particularly in medical, industrial, and research settings. This limit is established based on the principles of radiation protection, which prioritize minimizing exposure while considering the benefits of the work being conducted. The NCRP (National Council on Radiation Protection and Measurements) provides guidelines that reflect both a commitment to health and safety and the realities of working with radiation. The 5 rem/year limit helps protect workers from the potential adverse health effects, including an increased risk of cancer associated with radiation exposure, while still allowing them to perform necessary tasks. Understanding this limit is crucial because radiation exposure assessment is a key component of ensuring safe working conditions for individuals in fields that require the use of radiological technology.

**5. The term used for a patient's right to decide their medical treatment is known as patient what?**

- A. Advocacy**
- B. Autonomy**
- C. Consent**
- D. Confidentiality**

The term that refers to a patient's right to make decisions about their own medical treatment is autonomy. This concept is fundamental in medical ethics, as it emphasizes the importance of respecting an individual's personal freedom and self-determination. Autonomy grants patients the authority to make informed choices regarding their healthcare, including the right to accept or refuse treatments based on their values, beliefs, and preferences. In medical practice, ensuring that a patient exercises their autonomy often involves providing the necessary information about treatment options, potential risks, and benefits so that the patient can make well-informed decisions. This principle is key to building a trusting and respectful relationship between healthcare providers and patients, ultimately leading to better patient outcomes. The other options relate to important aspects of healthcare but do not specifically address the patient's right to make decisions regarding their treatment. Advocacy pertains to supporting and representing patients' rights, consent refers to the agreement to undergo a procedure or treatment, and confidentiality involves protecting patient privacy and the secrecy of their medical information.

**6. Before proceeding with treatment, what is essential if the therapy table is out of tolerance?**

- A. Adjust the table settings**
- B. Report it to a supervisor**
- C. Pause treatment and assess patient safety**
- D. Continue with the procedure**

When the therapy table is found to be out of tolerance, prioritizing patient safety is crucial. Pausing the treatment allows for a careful assessment of the situation to ensure that any potential risks to the patient are mitigated. This step emphasizes the importance of ensuring that all equipment is functioning correctly and safely before proceeding. By taking the time to assess the safety of the patient, technicians can avoid potential complications that could arise from an improperly calibrated or maintained therapy table. It is essential to have a safe environment for treatment, which underlines why this approach is essential in healthcare settings.

**7. What does PACS stand for in the context of imaging departments?**

- A. Patient Archive Communication System**
- B. Picture Analysis and Clinical Service**
- C. Picture Archiving and Communication System**
- D. Professional Archive for Consulting Specialists**

PACS stands for Picture Archiving and Communication System, which is a crucial technology in modern imaging departments. This system enables the digital storage, retrieval, management, and sharing of medical images. By converting analog images into digital formats, PACS allows for more efficient processing and access to medical images, ensuring that healthcare professionals can quickly and easily view images from various modalities such as X-rays, MRIs, and CT scans. The reason this answer is the most appropriate is that PACS specifically focuses on the 'picture' aspect of medical imaging, which emphasizes both the archival and communication capabilities essential for effectively managing patient imaging records. This system enhances workflow in radiology departments, reduces the need for physical film storage, and improves collaboration among healthcare providers. Other options presented do not accurately represent the function or purpose of PACS. For example, the first option misidentifies the system by calling it "Patient Archive Communication System," which does not accurately reflect the scope of image management. The second option, "Picture Analysis and Clinical Service," suggests a focus on analysis rather than the archiving and communication of images. Lastly, "Professional Archive for Consulting Specialists" fails to encompass the technological aspects and the comprehensive management of imaging data that PACS truly embodies.

**8. The grainy appearance of a CT image is known as:**

- A. Image blur**
- B. Image noise**
- C. Image resolution**
- D. Image distortion**

The grainy appearance of a CT image refers to image noise, which is the random variation of brightness or color in images that may obscure or distort the true image information. Noise can be caused by a variety of factors, including limitations in the detector technology, patient motion during the scan, or insufficient radiation dose. In the context of CT imaging, noise is particularly important to control because it can significantly affect the diagnostic capabilities of the images produced. By understanding noise, imaging professionals can take steps to optimize image quality, such as adjusting the exposure parameters or utilizing advanced reconstruction techniques, to ensure the images are as clear and useful as possible for interpretation.

**9. What is the primary function of thoracostomy tubes?**

- A. To deliver chemotherapy drugs**
- B. To drain the intrapleural space and mediastinum**
- C. To monitor radiation exposure**
- D. To provide supplemental oxygen**

The primary function of thoracostomy tubes is to drain the intrapleural space and mediastinum. This procedure is typically performed to remove air (pneumothorax), fluid (pleural effusion), or blood (hemothorax) from the pleural cavity, which can relieve pressure on the lungs and improve breathing. By allowing for better lung expansion and restoring normal pressures in the thoracic cavity, thoracostomy tubes play a critical role in managing various thoracic conditions. Other options related to delivering chemotherapy drugs, monitoring radiation exposure, or providing supplemental oxygen do not pertain to the purpose of thoracostomy tubes and address different medical interventions or treatments altogether. Thus, the focus of thoracostomy tubes remains on ensuring proper lung function by facilitating drainage in the thoracic region.

**10. What role does the detector array play in a CT scan?**

- A. To emit photons**
- B. To absorb radiation**
- C. To convert light to sound**
- D. To interpret signals**

In a CT scan, the detector array plays a crucial role by absorbing the radiation that has passed through the patient's body and converting it into electrical signals. As the X-ray beam passes through different tissues, the varying density of the tissues affects how much radiation is absorbed. The detector array captures the remaining radiation, which allows the system to generate detailed cross-sectional images of the body based on the level of absorption. This absorption process is fundamental for creating accurate images that radiologists use for diagnosis and treatment planning, making the detection of radiation a vital function of the array in the overall imaging 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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://asrtseal.examzify.com>**

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