

DAA EXAM 2 PRACTICE (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. The dorsal scapular nerve innervates which of the following muscles?**
 - A. The rhomboid muscles (minor and major) and levator scapulae
 - B. Sternocleidomastoid and trapezius
 - C. Subscapularis and teres major
 - D. Supraspinatus and infraspinatus
- 2. The smooth muscle of the walls of blood vessels is derived from which embryonic tissue?**
 - A. Somatic mesoderm of the lateral plate
 - B. Cardiac mesoderm
 - C. Neural crest
 - D. Endoderm
- 3. Which statement regarding torticollis is false?**
 - A. Patients can present with a head tilt and slight rotation of the head.
 - B. It involves the sternocleidomastoid muscle.
 - C. There is only a congenital form of torticollis.
 - D. Torticollis can also be known as "Wryneck".
- 4. Occipital (post-otic) myotomes will become which adult structures?**
 - A. Extrinsic muscles of the eye
 - B. Muscles of mastication
 - C. Muscles of the tongue
 - D. Muscles of facial expression
- 5. Which of the following is a superficial intrinsic back muscle?**
 - A. splenius capitis
 - B. semispinalis capitis
 - C. rotatores
 - D. multifidus
- 6. Which muscle group is primarily responsible for thigh abduction?**
 - A. Gluteus medius and gluteus minimus
 - B. Gracilis and adductor longus
 - C. Pectineus and obturator externus
 - D. Biceps femoris and semitendinosus

- 7. The deep/intrinsic (epaxial) muscles of the back are innervated by which of the following?**
- A. Cranial nerves
 - B. The dorsal ramus of a spinal nerve
 - C. The ventral ramus of a spinal nerve
 - D. The anterior ramus of a spinal nerve
- 8. All of the following create movements at more than one joint, except:**
- A. Gastrocnemius
 - B. Biceps femoris
 - C. Biceps brachii
 - D. Gluteus maximus
- 9. Which of the following is a completely superficial muscle?**
- A. Short head of biceps femoris
 - B. Soleus
 - C. Semitendinosus
 - D. Semimembranosus
- 10. Which tendon inserts onto the tibial tuberosity?**
- A. Quadriceps femoris muscle group
 - B. Hamstring muscle group
 - C. Adductors of the thigh
 - D. Extensors of the leg

Answers

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

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Explanations

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1. The dorsal scapular nerve innervates which of the following muscles?

- A. The rhomboid muscles (minor and major) and levator scapulae
- B. Sternocleidomastoid and trapezius
- C. Subscapularis and teres major
- D. Supraspinatus and infraspinatus

The dorsal scapular nerve carries motor fibers from the C5 root to muscles that pull the shoulder blade toward the spine and help lift it. It specifically innervates the rhomboid major, rhomboid minor, and levator scapulae. This makes the option describing the rhomboids and levator scapulae the best fit, since those muscles are the true targets of this nerve. The other muscles listed are supplied by different nerves—spinal accessory for the trapezius and sternocleidomastoid, subscapular nerves for subscapularis and teres major, and the suprascapular nerve for supraspinatus and infraspinatus—so they don't match the dorsal scapular nerve's distribution.

2. The smooth muscle of the walls of blood vessels is derived from which embryonic tissue?

- A. Somatic mesoderm of the lateral plate
- B. Cardiac mesoderm
- C. Neural crest
- D. Endoderm

Vascular smooth muscle comes from mesodermal tissue, specifically the mesenchyme surrounding developing vessels in the lateral plate mesoderm. As the primitive blood vessels form, these mesodermal cells differentiate into smooth muscle cells that encase the endothelial tube, giving the muscular layer of arteries and veins. The heart muscle arises from cardiac mesoderm, neural crest cells contribute to smooth muscle in some cranial vessels, and endoderm forms gut lining and related organs, not vascular smooth muscle. Therefore, the smooth muscle of vessel walls is derived from the somatic part of the lateral plate mesoderm.

3. Which statement regarding torticollis is false?

- A. Patients can present with a head tilt and slight rotation of the head.
- B. It involves the sternocleidomastoid muscle.
- C. There is only a congenital form of torticollis.
- D. Torticollis can also be known as "Wryneck".

Torticollis presents as an abnormal head position caused by unilateral shortening or spasm of the sternocleidomastoid muscle, leading to a tilt of the head toward the affected side with the chin rotated to the opposite side. While congenital torticollis is common, there are also acquired forms that develop later due to muscle spasm, trauma, infections, inflammatory conditions, ocular misalignment, or cervical dystonia. Because both congenital and acquired forms exist, the statement that there is only a congenital form is false. The other points fit the typical picture: involvement of the sternocleidomastoid, a head tilt with some rotation, and the alternate name Wryneck.

4. Occipital (post-otic) myotomes will become which adult structures?

- A. Extrinsic muscles of the eye
- B. Muscles of mastication
- C. Muscles of the tongue**
- D. Muscles of facial expression

Occipital somites are the embryologic source of tongue musculature. The myotomal cells from these somites migrate into the developing tongue and differentiate into all its muscles—both intrinsic and the extrinsic muscles—forming the tongue's motor apparatus, which is why the tongue muscles are said to originate from the occipital region. They are innervated by the hypoglossal nerve. By contrast, other muscle groups arise from different embryologic sources: extrinsic eye muscles come from preotic mesoderm, muscles of mastication from the first pharyngeal arch, and muscles of facial expression from the second pharyngeal arch.

5. Which of the following is a superficial intrinsic back muscle?

- A. splenius capitis**
- B. semispinalis capitis
- C. rotatores
- D. multifidus

The muscles of the back are organized by depth from the surface: superficial, intermediate, and deep intrinsic layers. The superficial intrinsic back muscles sit closest to the skin and fascia; splenius capitis is in this superficial layer, lying on top of deeper muscles and helping to extend and rotate the head. The other options belong to the deeper transversospinalis group, which includes muscles that span multiple vertebrae to stabilize and fine-tune movements. Semispinalis capitis, rotatores, and multifidus are all deeper back muscles involved in more nuanced stabilization and control of the spine. Because splenius capitis sits in the superficial layer, it is the superficial intrinsic back muscle among these options.

6. Which muscle group is primarily responsible for thigh abduction?

- A. Gluteus medius and gluteus minimus**
- B. Gracilis and adductor longus
- C. Pectineus and obturator externus
- D. Biceps femoris and semitendinosus

Hip abduction is mainly carried out by the gluteus medius and gluteus minimus. These muscles sit on the outer surface of the pelvis and attach to the greater trochanter of the femur. When they contract, they pull the thigh away from the midline and help stabilize the pelvis during activities like walking. Gracilis and adductor longus are in the medial thigh group and primarily adduct the thigh (move it toward the midline). Pectineus and obturator externus contribute to flexion or adduction and lateral rotation in some actions, but not primarily abduction. Biceps femoris and semitendinosus are hamstrings that extend the hip and flex the knee, not involved in primary thigh abduction.

7. The deep/intrinsic (epaxial) muscles of the back are innervated by which of the following?

- A. Cranial nerves
- B. The dorsal ramus of a spinal nerve**
- C. The ventral ramus of a spinal nerve
- D. The anterior ramus of a spinal nerve

The main idea is that intrinsic (epaxial) back muscles are supplied by the dorsal ramus of spinal nerves. These deep back muscles run along the posterior trunk and derive their nerve supply from the dorsal (posterior) rami, which deliver motor to the intrinsic back muscles and sensory to the overlying back skin. In contrast, the ventral (anterior) rami innervate the trunk's anterior and lateral muscles and the limbs, and cranial nerves supply muscles in the head and neck. So the dorsal ramus is the correct innervation for the deep back muscles.

8. All of the following create movements at more than one joint, except:

- A. Gastrocnemius
- B. Biceps femoris
- C. Biceps brachii
- D. Gluteus maximus**

Movements across more than one joint come from muscles that span multiple joints, known as biarticular (or multi-joint) muscles. The gastrocnemius crosses both the knee and the ankle, so contracting it can produce actions at two joints: knee flexion and ankle plantarflexion. The biceps femoris, specifically its long head, also crosses two joints (hip and knee), enabling hip extension and knee flexion when it contracts. The biceps brachii crosses the shoulder and the elbow, allowing both shoulder flexion and elbow flexion (and forearm supination) when it shortens. In contrast, the gluteus maximus primarily crosses only the hip joint to extend the hip, and it does not move the knee. Hence, it does not create movements at more than one joint.

9. Which of the following is a completely superficial muscle?

- A. Short head of biceps femoris
- B. Soleus
- C. Semitendinosus**
- D. Semimembranosus

A muscle that is completely superficial sits closest to the skin along its entire length, with no deeper muscle lying underneath it in that region. In the posterior thigh, the semitendinosus runs on the surface above the deeper semimembranosus, so it sits closer to the skin than the other options. The short head of the biceps femoris lies deeper than the long head, so it isn't entirely superficial. The soleus is a leg muscle, not a thigh muscle, and is covered by other muscles there. Therefore, the semitendinosus is the one that is completely superficial.

10. Which tendon inserts onto the tibial tuberosity?

A. Quadriceps femoris muscle group

B. Hamstring muscle group

C. Adductors of the thigh

D. Extensors of the leg

The tendon that reaches the tibial tuberosity is part of the knee's extensor mechanism. The quadriceps femoris muscle group forms a single tendon that runs over the patella and continues as the patellar ligament (tendon) to insert on the tibial tuberosity. This setup is what allows the quadriceps to straighten the knee by pulling on the tibia through that ligament. The other muscle groups don't attach directly to the tibial tuberosity with a single tendon: the hamstrings insert on the tibia from the posterior thigh, the adductors attach to the femur or pelvis, and "extensors of the leg" is too broad to identify a specific tendon insertion.

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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:

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

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