

# DAANCE Certification Practice Exam (Sample)

## Study Guide



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## **Questions**

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- 1. Which term describes the heart's rate of pumping blood?**
  - A. Cardiac output**
  - B. Stroke volume**
  - C. Heart rate**
  - D. Blood pressure**
- 2. Which part of the heart is responsible for sending deoxygenated blood to the lungs?**
  - A. Left ventricle**
  - B. Right ventricle**
  - C. Aorta**
  - D. Pulmonary vein**
- 3. What occurs during internal respiration?**
  - A. Oxygen leaves the bloodstream and enters lungs**
  - B. Carbon dioxide enters the bloodstream from the lungs**
  - C. Oxygen enters cells and carbon dioxide exits**
  - D. Blood is oxygenated in the heart**
- 4. Which symptom is NOT associated with syncope?**
  - A. Diaphoresis**
  - B. Pallor**
  - C. Elevated heart rate**
  - D. Double vision**
- 5. Which of the following is a function of insulin?**
  - A. Increases blood sugar levels**
  - B. Decreases blood sugar levels**
  - C. Stimulates digestion**
  - D. Stimulates appetite**
- 6. Where are ventricular foci located?**
  - A. In the atria**
  - B. In the ventricles**
  - C. In the sinoatrial node**
  - D. In the atrioventricular node**

- 7. Which of the following is an appropriate action when treating emesis with aspiration?**
- A. Maintain the left lateral position**
  - B. Turn the patient on the right side with the head down**
  - C. Provide 50% oxygen via nasal cannula**
  - D. Administer oral fluids immediately**
- 8. When is a nasopharyngeal airway indicated for use?**
- A. During hyperventilation**
  - B. When the tongue obstructs the airway**
  - C. In patients with severe asthma**
  - D. For intubated patients only**
- 9. What type of effects does Diazepam, also known as Valium, primarily provide?**
- A. Analgesic effects**
  - B. Amnesia effects**
  - C. Dissociative effects**
  - D. Stimulatory effects**
- 10. Where is a precordial stethoscope typically placed?**
- A. On the wrist**
  - B. Over the suprasternal notch**
  - C. On the abdominal region**
  - D. On the patient's forehead**

## **Answers**

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

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## **Explanations**

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**1. Which term describes the heart's rate of pumping blood?**

- A. Cardiac output**
- B. Stroke volume**
- C. Heart rate**
- D. Blood pressure**

The term that specifically describes the heart's rate of pumping blood is heart rate. Heart rate measures how many times the heart beats in a minute, indicating the frequency of the contractions that push blood throughout the body. This rate is crucial for assessing cardiovascular health and understanding how well the heart is functioning to meet the body's demands for oxygen and nutrients. Cardiac output refers to the total volume of blood the heart pumps in one minute, which is determined by both heart rate and stroke volume (the amount of blood pumped with each heartbeat). Stroke volume represents the amount of blood ejected from the heart during each contraction, and blood pressure measures the force of blood against the walls of the arteries. Together, these terms are related, but only heart rate directly describes the frequency of the heart's pumping action.

**2. Which part of the heart is responsible for sending deoxygenated blood to the lungs?**

- A. Left ventricle**
- B. Right ventricle**
- C. Aorta**
- D. Pulmonary vein**

The right ventricle plays a crucial role in the circulatory system by sending deoxygenated blood to the lungs. It receives blood that is low in oxygen from the body through the right atrium and then pumps it into the pulmonary arteries. This process is vital because it allows the blood to go to the lungs, where it can receive oxygen and release carbon dioxide. The left ventricle's primary function is to pump oxygenated blood to the rest of the body, making it essential but not involved in dealing with deoxygenated blood. The aorta is responsible for transporting oxygen-rich blood from the left ventricle to the body's tissues. The pulmonary vein, on the other hand, carries oxygenated blood from the lungs back to the left atrium of the heart. Thus, the right ventricle's specific function in sending deoxygenated blood to the lungs aligns perfectly with the question's requirements.

### 3. What occurs during internal respiration?

- A. Oxygen leaves the bloodstream and enters lungs
- B. Carbon dioxide enters the bloodstream from the lungs
- C. Oxygen enters cells and carbon dioxide exits**
- D. Blood is oxygenated in the heart

During internal respiration, the primary process involves the exchange of gases between the blood and the body's cells. Specifically, oxygen, which is carried by the blood, enters the cells where it is used for cellular metabolism and energy production. At the same time, carbon dioxide, a byproduct of metabolism, diffuses out of the cells into the bloodstream. This process is crucial as it supports the energy needs of the cells and helps remove waste products from cellular respiration. The other options describe processes that do not occur during internal respiration. For example, the movement of oxygen out of the bloodstream and into the lungs pertains to external respiration. Similarly, the entry of carbon dioxide into the bloodstream from the lungs also relates to external respiration and gas exchange occurring in the alveoli. Blood oxygenation in the heart is not directly linked to internal respiration, as that process mainly takes place in the lungs where oxygen is added to the blood and carbon dioxide is removed. Thus, option C accurately describes the essence of internal respiration, focusing on the key gas exchanges that sustain cellular function and overall homeostasis in the body.

### 4. Which symptom is NOT associated with syncope?

- A. Diaphoresis
- B. Pallor
- C. Elevated heart rate
- D. Double vision**

Syncope, commonly referred to as fainting, is characterized by a temporary loss of consciousness typically related to inadequate blood flow to the brain. Various physiological reactions can occur in the lead-up to syncope, with symptoms serving as warning signs indicating a potential loss of consciousness. Diaphoresis and pallor are closely associated with syncope. Diaphoresis, or excessive sweating, often occurs as the body reacts to stress or blood flow changes. Pallor, or a pale appearance, indicates decreased blood circulation, which can precede a fainting episode. An elevated heart rate can also be a response to various factors that may lead to syncope, such as anxiety or diminished blood volume. In contrast, double vision is not a typical symptom associated with syncope. While visual disturbances can occur in some contexts, they are not a hallmark of syncope itself. Instead, they could indicate other neurological conditions or issues that should be assessed separately from syncope. Therefore, identifying double vision as the symptom that does not relate to syncope is accurate.

**5. Which of the following is a function of insulin?**

- A. Increases blood sugar levels**
- B. Decreases blood sugar levels**
- C. Stimulates digestion**
- D. Stimulates appetite**

Insulin plays a crucial role in regulating blood glucose levels within the body. When blood sugar levels rise, such as after eating, insulin is secreted by the pancreas. Its primary function is to facilitate the uptake of glucose by the body's cells, allowing them to use glucose for energy or store it for future use, thereby decreasing the amount of glucose circulating in the bloodstream. By promoting the storage of glucose as glycogen in the liver and increasing the uptake of glucose by muscle cells, insulin effectively lowers blood sugar levels. This mechanism is vital for maintaining metabolic homeostasis and ensuring that our bodies have a steady supply of energy. In contrast, the other choices do not align with the primary function of insulin. Increasing blood sugar levels would be contrary to what insulin does. While insulin can have indirect effects on digestion and appetite, its primary and most critical role lies in the regulation of blood glucose levels.

**6. Where are ventricular foci located?**

- A. In the atria**
- B. In the ventricles**
- C. In the sinoatrial node**
- D. In the atrioventricular node**

Ventricular foci are located in the ventricles of the heart. These foci refer to areas of ectopic pacemaker activity that can generate electrical impulses independent of the heart's primary pacemaker, the sinoatrial (SA) node. This can occur due to various reasons, such as ischemia, structural changes, or other cardiac conditions, leading to abnormal heart rhythms known as arrhythmias. The other locations mentioned, such as the atria, sinoatrial node, and atrioventricular node, are not associated with ventricular foci. The atria are responsible for their own pacemaking and contractile function, while the sinoatrial node is the primary pacemaker of the heart, and the atrioventricular node functions as a relay station in the conduction pathway from the atria to the ventricles. Hence, the distinction is clear that the ventricular foci specifically arise from within the ventricles.

**7. Which of the following is an appropriate action when treating emesis with aspiration?**

- A. Maintain the left lateral position**
- B. Turn the patient on the right side with the head down**
- C. Provide 50% oxygen via nasal cannula**
- D. Administer oral fluids immediately**

Maintaining the patient in a right side down position with the head angled down can help facilitate drainage of aspirated contents and minimize the risk of further aspiration into the lungs. This positioning allows gravity to assist in keeping the airway clear and can promote better ventilation by directing any aspirated materials away from the central airways. In the context of treating emesis with aspiration, this technique is crucial for protecting the patient's airway. Ensuring that the head is lower than the chest can help discharge any stomach contents that may have entered the airway, reducing the risk of aspiration pneumonia or other complications associated with aspiration. Considering other options, maintaining the left lateral position might not be as effective in draining fluid or vomit as the right side down position. Providing 50% oxygen via nasal cannula may not directly address the immediate risks of aspiration are present and might not provide effective management in cases of severe respiratory distress due to aspiration. Administering oral fluids immediately could worsen the situation by introducing more material into the airway, potentially complicating the aspiration issue further.

**8. When is a nasopharyngeal airway indicated for use?**

- A. During hyperventilation**
- B. When the tongue obstructs the airway**
- C. In patients with severe asthma**
- D. For intubated patients only**

A nasopharyngeal airway is specifically indicated for use when the tongue obstructs the airway. This device provides a means to maintain airway patency by bypassing the obstruction created by the tongue, particularly in an unconscious or semi-conscious patient where the reflexes may not effectively prevent the tongue from blocking the airway. In situations where the airway is compromised due to the tongue falling back into the throat, the nasopharyngeal airway serves as a practical solution to ensure that air can enter the trachea unobstructed. Its design allows it to be inserted through the nostril and into the nasopharynx, thereby preventing the tongue from blocking the airway, which can lead to hypoxia and respiratory distress. The other answer options do not accurately reflect the appropriate use of a nasopharyngeal airway. For instance, during hyperventilation, the airway is typically not obstructed, and the issue relates more to ventilation rather than airway patency. In cases of severe asthma, airway management may require specific interventions that are not limited to the nasopharyngeal airway. Lastly, while intubated patients require different forms of airway management, a nasopharyngeal airway is not utilized exclusively for intubated individuals,

**9. What type of effects does Diazepam, also known as Valium, primarily provide?**

- A. Analgesic effects**
- B. Amnesia effects**
- C. Dissociative effects**
- D. Stimulatory effects**

Diazepam, commonly known as Valium, primarily provides amnesia effects, which is particularly relevant in the context of its use in medical and dental procedures. This medication belongs to the benzodiazepine class, and its pharmacological properties include anxiolytic (anxiety reduction), muscle relaxant, anticonvulsant, and sedative effects. Among these, its ability to cause retrograde amnesia—particularly during procedures where patients are often required to have minimal memory of the experience—makes it valuable in clinical settings. The application of diazepam can help patients undergo procedures with reduced anxiety and discomfort, while also limiting their recollection of the event. This makes it an effective choice when a limited memory recall is desirable, such as during surgical interventions or dental work. In contrast, options related to analgesic effects, dissociative effects, and stimulatory effects highlight different drug classes and their specific mechanisms. Analgesics are designed to relieve pain, dissociatives induce a sense of detachment from the environment and self, and stimulatory effects increase activity in the nervous system. Diazepam, however, does not primarily function in these ways, focusing instead on inducing amnesia along with its other sedative properties.

**10. Where is a precordial stethoscope typically placed?**

- A. On the wrist**
- B. Over the suprasternal notch**
- C. On the abdominal region**
- D. On the patient's forehead**

A precordial stethoscope is typically placed over the suprasternal notch, which is located at the top of the sternum where the collarbones meet. This location is chosen because it provides an optimal position for the clinician to listen to the heart sounds, especially in a clinical setting. The stethoscope can effectively pick up the heart's sounds through the chest wall, allowing for better assessment of cardiac function during procedures, such as anesthesia or critical care situations. Positioning the stethoscope at this point ensures that the sounds of the heart are transmitted clearly, as it is close to the heart's location compared to other areas. The other options, such as placing it on the wrist, abdominal region, or forehead, would not provide the same quality of acoustic information regarding the heart and would not be standard practice in patient monitoring or assessment during medical procedures.