

# DAANCE CERTIFICATION PRACTICE EXAM (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. Which muscles are classified as accessory muscles of respiration?**
  - A. Rectus abdominis and triceps
  - B. Deltoids and biceps
  - C. Sternocleidomastoid and scalenes
  - D. Quadriceps and hamstrings
- 2. What should be done if a patient exhibits a drop in blood pressure during a heart attack?**
  - A. Immediately administer epinephrine
  - B. Activate emergency response
  - C. Wait for vitals to stabilize
  - D. Provide comfort measures and monitor
- 3. What is the initial treatment for premature ventricular contractions (PVC)?**
  - A. Administer adenosine IV
  - B. Administer morphine IV
  - C. Determine the cause and correct it
  - D. Provide transcutaneous pacing
- 4. Which symptom is a sign of issues with liver function?**
  - A. Fatigue
  - B. Shortness of breath
  - C. Edema
  - D. Insomnia
- 5. What anatomical structures make up the spinal column?**
  - A. Brain and cerebellum
  - B. Cerebrum and medulla oblongata
  - C. Cervical, thoracic, lumbar, sacral, and coccygeal vertebrae
  - D. Frontal and maxillary bones

- 6. What is a common medication used to treat hypertension that is also a diuretic?**
- A. Norvasc
  - B. Atenolol
  - C. HCTZ
  - D. Diovan
- 7. Which symptom is NOT commonly associated with cardiovascular review of systems?**
- A. Edema
  - B. Weight loss
  - C. Chest or arm pain
  - D. Dizziness
- 8. In the event of ventricular tachycardia, what is a critical element of treatment?**
- A. Administering a fluid bolus
  - B. Providing low-flow oxygen
  - C. Preparing for synchronous cardioversion
  - D. Performing a head tilt chin lift
- 9. Which blood vessels deliver deoxygenated blood to the right atrium?**
- A. Coronary arteries
  - B. Pulmonary veins
  - C. Inferior and Superior vena cava
  - D. Aorta
- 10. What is the primary function of the trigeminal nerve?**
- A. Motor control of facial muscles
  - B. Sensory input from the teeth and jaws
  - C. Regulation of autonomic functions
  - D. Touch sensation in the scalp



## **Answers**

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

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## **Explanations**

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## 1. Which muscles are classified as accessory muscles of respiration?

- A. Rectus abdominis and triceps
- B. Deltoids and biceps
- C. Sternocleidomastoid and scalenes**
- D. Quadriceps and hamstrings

The accessory muscles of respiration play a crucial role in assisting with the breathing process, particularly during situations where the demand for oxygen increases, such as during physical exertion or respiratory distress. The sternocleidomastoid and scalenes are indeed classified as accessory muscles because they facilitate the elevation of the rib cage, thereby expanding the thoracic cavity and aiding in inhalation. The sternocleidomastoid muscle, which runs from the sternum and clavicle to the mastoid process of the skull, helps elevate the sternum when the head is fixed. Similarly, the scalene muscles, found in the lateral neck, aid in elevating the first two ribs during deep breathing. This elevatory action assists the primary respiratory muscles, such as the diaphragm, in increasing the volume of the thoracic cavity and enhancing airflow into the lungs. In contrast, the other options do not include muscles that serve this specific purpose for respiration. The rectus abdominis and triceps, while important in other movements, do not assist in respiration. Similarly, the deltoids and biceps are primarily involved in shoulder and arm movements. The quadriceps and hamstrings contribute to leg movements and are not involved in respiratory mechanics at all. Therefore, the

## 2. What should be done if a patient exhibits a drop in blood pressure during a heart attack?

- A. Immediately administer epinephrine
- B. Activate emergency response
- C. Wait for vitals to stabilize
- D. Provide comfort measures and monitor**

In the context of a patient experiencing a drop in blood pressure during a heart attack, providing comfort measures and monitoring is a crucial response. This approach focuses on the immediate needs of the patient by ensuring they are in a comfortable position, which can sometimes help alleviate symptoms and improve their overall condition. Continuous monitoring of vital signs, including blood pressure and heart rate, is essential during this critical time to assess how the patient's condition evolves. While activating emergency response is important in emergencies, the suggestion to wait for vitals to stabilize or to immediately administer epinephrine may not be the best course of action without further evaluation. Understanding the patient's overall state and providing comfort while actively monitoring can help maintain their stability until appropriate medical interventions can be enacted. Thus, this method aligns well with providing immediate, patient-centered care in an acute setting.

### 3. What is the initial treatment for premature ventricular contractions (PVC)?

- A. Administer adenosine IV
- B. Administer morphine IV
- C. Determine the cause and correct it**
- D. Provide transcutaneous pacing

The initial treatment for premature ventricular contractions (PVC) involves determining the cause and correcting it. PVCs can be caused by various factors, including electrolyte imbalances, stress, caffeine consumption, or underlying heart conditions. Addressing the underlying cause is critical because it may resolve the PVCs without the need for further intervention. Focusing on the etiology allows healthcare providers to offer targeted treatment. For instance, if PVCs stem from low potassium levels, administering potassium may alleviate the PVCs. This approach is crucial since symptomatic PVCs can lead to more serious arrhythmias if not managed appropriately. While the other options may provide treatments for specific situations, they do not prioritize investigating and correcting the underlying issues creating the PVCs, which is essential for comprehensive and effective patient care.

### 4. Which symptom is a sign of issues with liver function?

- A. Fatigue
- B. Shortness of breath
- C. Edema**
- D. Insomnia

Edema, which refers to swelling caused by excess fluid trapped in the body's tissues, can indeed be a sign of liver dysfunction. When the liver is not functioning properly, it can lead to an imbalance in the production of proteins necessary for maintaining proper fluid balance in the bloodstream. This can result in a condition called hypoalbuminemia, where low levels of albumin cause fluid to leak into surrounding tissues, leading to noticeable swelling, especially in the legs and abdomen. Fatigue and insomnia can also occur due to liver issues, but they are more ambiguous and can be caused by a variety of other conditions. Shortness of breath is typically unrelated to liver function and is more commonly associated with respiratory or cardiovascular problems. Therefore, while fatigue and insomnia might suggest liver involvement, edema is a more direct and specific symptom indicating significant issues with liver function, making it the most relevant choice.

### 5. What anatomical structures make up the spinal column?

- A. Brain and cerebellum
- B. Cerebrum and medulla oblongata
- C. Cervical, thoracic, lumbar, sacral, and coccygeal vertebrae**
- D. Frontal and maxillary bones

The spinal column, also known as the vertebral column or backbone, consists of a series of vertebrae that provide structural support and protect the spinal cord. The vertebrae are categorized into different regions: cervical (neck), thoracic (mid-back), lumbar (lower back), sacral (pelvic area), and coccygeal (tailbone). This organization allows for flexibility and mobility in the torso while maintaining a protective enclosure for the spinal cord, which runs through the center of the vertebral column. The other choices reflect structures that are not part of the spinal column. The brain and cerebellum, for example, are components of the central nervous system located within the skull, while the cerebrum and medulla oblongata are also parts of the brain, further reinforcing that these anatomical structures are separate from those making up the spinal column. The frontal and maxillary bones pertain to the facial skeleton, which is unrelated to the spinal column. Thus, the option highlighting the cervical, thoracic, lumbar, sacral, and coccygeal vertebrae accurately identifies the anatomical structures that compose the spinal column.

**6. What is a common medication used to treat hypertension that is also a diuretic?**

- A. Norvasc
- B. Atenolol
- C. HCTZ**
- D. Diovan

*Hydrochlorothiazide (HCTZ) is a commonly prescribed medication for managing hypertension that also acts as a diuretic. Diuretics, often known as "water pills," help the body eliminate excess fluid and sodium by promoting urine production. This reduction in fluid volume can lower blood pressure, making HCTZ effective in treating hypertension. The mechanism of action involves inhibiting the reabsorption of sodium in the distal convoluted tubules of the kidneys, which leads to increased urination and a subsequent decrease in blood volume. This helps to manage hypertension by reducing the workload on the heart and blood vessels. In contrast, the other medications listed, such as Norvasc (an antihypertensive calcium channel blocker), Atenolol (a beta-blocker), and Diovan (an angiotensin receptor blocker), do not have diuretic properties, making HCTZ the standout choice for this question regarding its dual role in treating hypertension and serving as a diuretic.*

**7. Which symptom is NOT commonly associated with cardiovascular review of systems?**

- A. Edema
- B. Weight loss**
- C. Chest or arm pain
- D. Dizziness

*Weight loss is not commonly associated with the cardiovascular review of systems. In a cardiovascular context, symptoms typically focus on issues relating directly to heart function and circulation. Symptoms such as edema involve fluid retention and can indicate heart failure or problems with blood circulation. Chest or arm pain is often associated with angina or myocardial infarction, reflecting a direct issue with heart health. Dizziness may result from inadequate blood flow or heart function, which again relates closely to cardiovascular health. In this context, weight loss, while it can occur in some cardiovascular diseases, is not a primary symptom used to assess cardiovascular health or issues during a typical review of systems. It is more frequently a symptom associated with other types of medical conditions such as metabolic disorders or malignancies rather than directly pointing to cardiovascular problems.*

**8. In the event of ventricular tachycardia, what is a critical element of treatment?**

- A. Administering a fluid bolus
- B. Providing low-flow oxygen
- C. Preparing for synchronous cardioversion**
- D. Performing a head tilt chin lift

*In the situation of ventricular tachycardia, preparing for synchronous cardioversion is a critical treatment component. Ventricular tachycardia is a rapid heart rhythm that originates from improper electrical activity in the ventricles, which can lead to inadequate blood flow and potentially result in cardiac arrest. Synchronous cardioversion involves administering an electrical shock to the heart that is synchronized with the patient's heartbeat, which is designed to restore a normal rhythm while minimizing the risk of inducing ventricular fibrillation. This is especially crucial when the ventricular tachycardia is unstable or when the patient is symptomatic. Other treatments like administering a fluid bolus can be useful in some contexts, yet they do not address the rapid electrical activity directly. Low-flow oxygen can help with hypoxia but will not resolve the critical arrhythmia itself, and procedures such as the head tilt chin lift are more appropriate for ensuring airway patency rather than treating cardiac arrhythmias. Therefore, the focus on synchronous cardioversion as a treatment illustrates the urgency in correcting the potentially life-threatening situation created by ventricular tachycardia.*

**9. Which blood vessels deliver deoxygenated blood to the right atrium?**

- A. Coronary arteries
- B. Pulmonary veins
- C. Inferior and Superior vena cava**
- D. Aorta

*The correct choice identifies the inferior and superior vena cava as the blood vessels responsible for delivering deoxygenated blood to the right atrium. The superior vena cava drains blood from the upper body, including the head, neck, and arms, while the inferior vena cava collects blood from the lower body, encompassing the abdomen and legs. This blood is low in oxygen because it has already circulated through the body, delivering oxygen to tissues and collecting carbon dioxide and other waste products. In contrast, the coronary arteries are responsible for supplying oxygenated blood to the heart muscle itself and do not transport deoxygenated blood to the right atrium. The pulmonary veins are uniquely responsible for carrying oxygenated blood from the lungs to the left atrium, not deoxygenated blood. Finally, the aorta is the major artery that carries oxygen-rich blood from the heart to the rest of the body, contrasting with the function of the vena cavae. Thus, the inferior and superior vena cava play a critical role in the systemic circulation by returning deoxygenated blood to the heart, ensuring it can be reoxygenated in the lungs.*

## 10. What is the primary function of the trigeminal nerve?

- A. Motor control of facial muscles
- B. Sensory input from the teeth and jaws**
- C. Regulation of autonomic functions
- D. Touch sensation in the scalp

*The primary function of the trigeminal nerve is to provide sensory input from the teeth and jaws. This cranial nerve is crucial for facial sensation, and it is the largest of the cranial nerves, comprising three major branches: the ophthalmic, maxillary, and mandibular nerves. Each branch is responsible for conveying sensory information from different regions of the face, which includes not only facial touch but also sensations such as pain and temperature from areas including the teeth and jaws. This role is essential for activities such as chewing, speaking, and overall physical interaction with food and surroundings, making it a vital component in both the sensory and motor systems of the face. The other options, while they may relate to other functions of cranial nerves, do not accurately reflect the primary role of the trigeminal nerve. For instance, motor control of facial muscles is primarily the role of the facial nerve, regulation of autonomic functions pertains more to the autonomic nervous system, and touch sensation in the scalp involves other nerves that are not the primary functions of the trigeminal nerve. Thus, the correct focus on the sensory input from the teeth and jaws reflects the key role that the trigeminal nerve plays in the facial sensory network.*



## 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:

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

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