

GROSS ANATOMY DRY LABORATORY LOWER BODY PRACTICE TEST (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 obturator externus is innervated by which nerve division?**
 - A. Posterior division of obturator nerve
 - B. Anterior division of obturator nerve
 - C. Femoral nerve
 - D. Sciatic nerve
- 2. What action does the iliacus perform at the hip?**
 - A. Internal rotation and abduction
 - B. Flexion and lateral rotation of thigh at hip
 - C. Extension
 - D. Adduction
- 3. The posterior division of the obturator nerve provides innervation to which portion of the adductor magnus?**
 - A. Hamstring Portion
 - B. Adductor Portion
 - C. Both Portions
 - D. None
- 4. Gerdy's tubercle has what attached to it?**
 - A. Lateral knee fascia
 - B. Iliotibial tract
 - C. Patellar ligament
 - D. Popliteus tendon
- 5. The articular surface of the sacrum has which joint attached on its anterior aspect?**
 - A. Hip joint
 - B. Lumbar facet joint
 - C. Pubic symphysis
 - D. Sacroiliac joint auricular (anterior)

- 6. What action does the adductor longus perform?**
- A. Flexion of thigh
 - B. Abduction
 - C. Adduction and medial rotation of thigh
 - D. Extension of thigh
- 7. Between which vertebral levels is the L5-S1 intervertebral disc located?**
- A. L5-S1
 - B. L4-L5
 - C. L3-L4
 - D. S1-S2
- 8. The gluteal tuberosity serves as an attachment for which muscle?**
- A. Adductor Magnus (Adductor/Lateral)
 - B. Gluteus Medius
 - C. Gluteus Maximus
 - D. Tensor Fasciae Latae
- 9. Which supracondylar ridge structure is most closely associated with the lateral gastrocnemius?**
- A. Plantaris
 - B. Oblique popliteal ligament
 - C. Lateral head of gastrocnemius
 - D. Medial head of gastrocnemius
- 10. What action does the semimembranosus perform?**
- A. Extends thigh at hip
 - B. Medially rotates tibia
 - C. Flexes leg
 - D. Abducts thigh

Answers

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

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Explanations

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1. The obturator externus is innervated by which nerve division?

- A. Posterior division of obturator nerve**
- B. Anterior division of obturator nerve
- C. Femoral nerve
- D. Sciatic nerve

Obturator externus receives motor input from branches of the obturator nerve that pass to the muscle after the nerve splits in the pelvis. The posterior division of the obturator nerve is the branch that supplies this deep medial thigh muscle, whereas the anterior division goes to other medial thigh muscles like adductor longus, adductor brevis, and gracilis. The femoral nerve serves the anterior thigh muscles, not obturator externus, and the sciatic nerve covers the posterior thigh and leg, not this muscle. So, the innervation of obturator externus by the posterior division of the obturator nerve best fits the anatomical pattern.

2. What action does the iliacus perform at the hip?

- A. Internal rotation and abduction
- B. Flexion and lateral rotation of thigh at hip**
- C. Extension
- D. Adduction

Hip flexion is the primary job of the iliacus, acting as part of the iliopsoas to pull the femur forward at the hip. When the thigh is flexed, its fibers also contribute to external (lateral) rotation due to their oblique orientation across the joint. It does not extend the hip, nor does it abduct or adduct the thigh, which are actions favored by other muscle groups. So the iliacus produces flexion of the thigh at the hip and can assist with external rotation when the thigh is flexed.

3. The posterior division of the obturator nerve provides innervation to which portion of the adductor magnus?

- A. Hamstring Portion
- B. Adductor Portion**
- C. Both Portions
- D. None

The adductor magnus has two parts with different nerve supplies. The part that adducts the thigh (the adductor portion) receives motor fibers from the obturator nerve, specifically its posterior division. The other part, which is the hamstring portion, is supplied by the tibial portion of the sciatic nerve. So, the posterior division of the obturator nerve innervates the adductor portion of the adductor magnus. This dual innervation explains why hip adduction can be affected by obturator nerve injury (to the adductor part) while the hamstring-associated actions rely on the sciatic nerve.

4. Gerdy's tubercle has what attached to it?

- A. Lateral knee fascia
- B. Iliotibial tract**
- C. Patellar ligament
- D. Popliteus tendon

Gerdy's tubercle on the lateral proximal tibia is the insertion point for the iliotibial tract. This thick band of fascia lata, formed by the tensor fasciae latae and gluteus maximus, runs down the outer thigh and attaches here to help stabilize the knee by pulling on the lateral side of the tibia, especially when the leg is extended. The other options don't attach there: the patellar ligament attaches to the tibial tuberosity in front, the popliteus tendon attaches to the posterior tibia, and the lateral knee fascia is a broader term not specifying this insertion.

5. The articular surface of the sacrum has which joint attached on its anterior aspect?

- A. Hip joint
- B. Lumbar facet joint
- C. Pubic symphysis
- D. Sacroiliac joint auricular (anterior)**

The anterior surface of the sacrum carries the sacral auricular surface that articulates with the ilium, forming the sacroiliac joint. This joint is the interface between the sacrum and the pelvic bone, allowing transfer of weight from the spine to the pelvis. The other options don't fit: the hip joint involves the femoral head and acetabulum, the lumbar facet joints are between lumbar vertebrae, and the pubic symphysis is a midline cartilaginous joint between the pubic bones.

6. What action does the adductor longus perform?

- A. Flexion of thigh
- B. Abduction
- C. Adduction and medial rotation of thigh**
- D. Extension of thigh

Adductor longus is a muscle of the medial thigh that pulls the femur toward the midline. Its primary action is adduction of the thigh, and it also contributes to medial rotation, with the exact role influenced by the hip's position (it can assist in flexion when the thigh is extended and in medial rotation when the thigh is flexed). It does not primarily abduct or extend the thigh, which are actions dominated by other muscles. So, the combination of adduction and medial rotation best captures what adductor longus does.

7. Between which vertebral levels is the L5-S1 intervertebral disc located?

A. L5-S1

B. L4-L5

C. L3-L4

D. S1-S2

The intervertebral discs sit between adjacent vertebral bodies. The L5-S1 disc is the cushion located between the fifth lumbar vertebra and the first sacral vertebra, marking the transition from the lumbar spine to the sacrum. Higher options like L4-L5 or L3-L4 refer to levels above this junction, while S1-S2 would be between sacral segments (which are fused and do not have a typical intervertebral disc). So the correct location is between L5 and S1.

8. The gluteal tuberosity serves as an attachment for which muscle?

A. Adductor Magnus (Adductor/Lateral)

B. Gluteus Medius

C. Gluteus Maximus

D. Tensor Fasciae Latae

The gluteal tuberosity is the proximal femur's posterior rough patch that serves as the insertion point for the gluteus maximus. This large muscle is the main hip extensor and powerful external rotator, and its tendon anchors here (with some fibers also attaching to the iliotibial tract). That connection explains why extending the thigh and stabilizing the hip rely on the gluteal tuberosity. The other muscles attach to different sites—gluteus medius to the greater trochanter, tensor fasciae latae to the iliotibial tract and iliac crest, and the adductor magnus along the linea aspera/adductor tubercle—so their insertions aren't on the gluteal tuberosity.

9. Which supracondylar ridge structure is most closely associated with the lateral gastrocnemius?

A. Plantaris

B. Oblique popliteal ligament

C. Lateral head of gastrocnemius

D. Medial head of gastrocnemius

The important idea is that the two heads of the gastrocnemius originate from the femoral condyles and the nearby supracondylar lines. The lateral head attaches from the lateral femoral condyle and the adjacent lateral supracondylar line, placing it right over that ridge. That direct association makes the lateral head of the gastrocnemius the structure most closely tied to the lateral supracondylar ridge. The other options don't share that clear bony-origin relationship: the medial head comes from the medial side, the oblique popliteal ligament is a knee ligament rather than a muscle attachment on the ridge, and the plantaris, while also a small leg muscle in the region, isn't the defining supracondylar-ridge structure linked to the lateral gastrocnemius.

10. What action does the semimembranosus perform?

- A. Extends thigh at hip
- B. Medially rotates tibia
- C. Flexes leg**
- D. Abducts thigh

The semimembranosus is a hamstring muscle crossing both the hip and knee joints, so it can act at either joint. Its main action at the knee is to flex the leg. When the knee flexes, it also helps medially rotate the tibia, providing coordinated rotation during knee bending. At the hip, it assists in extending the thigh, but the most directly tested action for this muscle is knee flexion. Abducting the thigh isn't a function of this muscle, and while extending the thigh is possible, the primary, most characteristic action emphasized in many tests is flexing the leg.

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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://grossanatomydrylablowerbody.examzify.com>

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

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