

HOSA Sports Medicine Assessment Practice Test (Sample)

Study Guide



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Questions

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- 1. What is the typical core temperature for someone experiencing heat stroke?**
 - A. Normal range of 97°F-99°F**
 - B. Below 100°F**
 - C. 105°F or higher**
 - D. Between 100°F-104°F**
- 2. Which term describes the act of not fulfilling a responsibility in a way that can cause harm?**
 - A. Omission**
 - B. Liability**
 - C. Malpractice**
 - D. Negligence**
- 3. Which of the following is NOT a symptom of exertional heat exhaustion?**
 - A. Dizziness**
 - B. Loss of coordination**
 - C. Rapid strong pulse**
 - D. Flushed skin**
- 4. Why is it important to cool down a heat stroke victim before transporting them to a hospital?**
 - A. To minimize discomfort**
 - B. To prevent further dehydration**
 - C. To perform medical evaluations**
 - D. To reduce the potential for brain injury**
- 5. What are the first steps in controlling external bleeding?**
 - A. Apply direct pressure and elevate the area**
 - B. Apply ice and immobilize**
 - C. Remove all clothing from the affected area**
 - D. Wrap the area in a bandage without pressure**

- 6. What advantage does thermoplastic provide to an injured athlete?**
- A. Complete immobilization of the injury**
 - B. Increased awareness that the injury is protected**
 - C. Full range of motion during healing**
 - D. Immediate pain relief upon application**
- 7. What combination contributes to the increase of muscular strength, power, and endurance in athletes during rehab?**
- A. Pain management and emotional support**
 - B. Rest and relaxation techniques**
 - C. Pain-free active range of motion**
 - D. Diet supplementation and fitness classes**
- 8. What movement is defined as turning the palm up?**
- A. Pronation**
 - B. Elevation**
 - C. Supination**
 - D. Retraction**
- 9. How is caloric balance calculated?**
- A. Calories consumed divided by calories expended**
 - B. Calories expended plus calories consumed**
 - C. Calories consumed minus calories expended**
 - D. Calories consumed multiplied by calories expended**
- 10. What is the last stage of the depression cycle following an injury?**
- A. Depression**
 - B. Acceptance**
 - C. Bargaining**
 - D. Anger**

Answers

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

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Explanations

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1. What is the typical core temperature for someone experiencing heat stroke?

- A. Normal range of 97°F-99°F**
- B. Below 100°F**
- C. 105°F or higher**
- D. Between 100°F-104°F**

The typical core temperature for someone experiencing heat stroke is 105°F or higher. Heat stroke is a severe form of heat illness that occurs when the body's thermoregulatory system fails, and the body temperature rises to a dangerous level. When the core temperature reaches 105°F, the body's ability to cool itself is overwhelmed, leading to potential damage to internal organs and disrupting normal bodily functions. This condition often presents with symptoms such as altered mental state, confusion, and potentially loss of consciousness, making it a medical emergency requiring immediate intervention. A temperature below this threshold, such as those found in the other options, would indicate different levels of heat illness, such as heat exhaustion or normal thermoregulation, but not heat stroke, which is a critical and life-threatening condition.

2. Which term describes the act of not fulfilling a responsibility in a way that can cause harm?

- A. Omission**
- B. Liability**
- C. Malpractice**
- D. Negligence**

The term that describes the act of not fulfilling a responsibility in a way that can cause harm is negligence. Negligence refers to a failure to take proper care in doing something, which results in damage or injury to another party. In the context of sports medicine, this could involve a healthcare provider not adhering to the standard of care expected in their profession, potentially leading to harm to an athlete or patient. Negligence encompasses various legal and ethical considerations, highlighting the necessity for individuals in positions of responsibility, particularly in healthcare, to act in a manner that avoids foreseeably causing harm to others. This concept is fundamental in establishing the accountability of professionals for their actions or inactions that may lead to adverse outcomes for those they serve.

3. Which of the following is NOT a symptom of exertional heat exhaustion?

- A. Dizziness**
- B. Loss of coordination**
- C. Rapid strong pulse**
- D. Flushed skin**

Exertional heat exhaustion is a heat-related illness that occurs when the body loses an excessive amount of water and salt, typically through sweating, leading to a variety of symptoms. Among the listed symptoms, flushed skin is not typically associated with exertional heat exhaustion. Instead, individuals suffering from heat exhaustion often present with pale or clammy skin due to the body's efforts to cool down through sweating. The other symptoms listed, such as dizziness, loss of coordination, and a rapid strong pulse, are indeed common manifestations of exertional heat exhaustion. Dizziness can occur as a result of decreased blood flow to the brain due to dehydration, while loss of coordination might result from electrolyte imbalances or dehydration affecting motor control. A rapid strong pulse is the body's response to the stress of overheating and indicates increased heart rate as it tries to cool itself down. Understanding these symptoms can help in the timely recognition and management of heat-related illnesses in athletes and active individuals.

4. Why is it important to cool down a heat stroke victim before transporting them to a hospital?

- A. To minimize discomfort**
- B. To prevent further dehydration**
- C. To perform medical evaluations**
- D. To reduce the potential for brain injury**

Cooling down a heat stroke victim before transporting them to a hospital is critical to reduce the potential for brain injury. Heat stroke occurs when the body overheats, typically due to prolonged exposure to high temperatures or excessive physical exertion in the heat. This condition can lead to cellular damage, particularly within the brain, due to hyperthermia. High internal body temperatures can disrupt normal brain function and cause severe complications, including long-lasting neurological damage or even death. By actively cooling the victim, the aim is to lower the core body temperature effectively and promptly, alleviating the stress on the brain and other vital organs. This intervention helps to preserve cognitive function and reduces the risk of serious complications associated with brain injury. The urgency of cooling the victim cannot be understated, as the longer the brain is subjected to elevated temperatures, the greater the risk of irreversible damage. Thus, prompt cooling is a crucial step in the emergency response to heat stroke, enhancing the likelihood of recovery without significant long-term consequences.

5. What are the first steps in controlling external bleeding?

- A. Apply direct pressure and elevate the area**
- B. Apply ice and immobilize**
- C. Remove all clothing from the affected area**
- D. Wrap the area in a bandage without pressure**

The first steps in controlling external bleeding involve applying direct pressure to the wound and elevating the injured area above the level of the heart if possible. Applying direct pressure helps to compress the blood vessels at the site of the injury, which can significantly reduce or stop the flow of blood. Elevating the area can also aid in minimizing blood loss by utilizing gravity to slow down bleeding. This approach is essential in emergency situations where immediate action is necessary to prevent excessive blood loss and promote quicker coagulation of the blood. Other methods, such as applying ice or immobilizing the area, may have their own benefits in certain contexts, but they do not directly address the immediate need to control bleeding. Removing clothing from the affected area can complicate the situation, risking additional injury or contamination, while wrapping the area in a bandage without applying pressure will not provide the necessary control over the bleeding. Therefore, applying direct pressure and elevation remains the most effective and appropriate initial response to external bleeding.

6. What advantage does thermoplastic provide to an injured athlete?

- A. Complete immobilization of the injury**
- B. Increased awareness that the injury is protected**
- C. Full range of motion during healing**
- D. Immediate pain relief upon application**

Thermoplastic materials offer a unique advantage for injured athletes by increasing awareness that the injury is protected. These materials can be molded to fit the contours of the injured area, providing a secure and supportive structure around it. This added support not only helps in protecting the injury from further damage but also serves as a visual and physical reminder to the athlete that careful movements are necessary to avoid aggravating the condition. While thermoplastic materials do provide some degree of immobilization, it is not complete, as the ultimate goal in many injuries is to allow for some movement and rehabilitation. They are not designed specifically for immediate pain relief; rather, their primary function is to stabilize the injury. Additionally, the use of thermoplastic does not allow for a full range of motion during healing; instead, it restricts movement to promote proper healing while still reminding the athlete of the need for caution. Thus, the primary benefit is the heightened awareness and confidence in the protection offered during the recovery process.

7. What combination contributes to the increase of muscular strength, power, and endurance in athletes during rehab?

- A. Pain management and emotional support**
- B. Rest and relaxation techniques**
- C. Pain-free active range of motion**
- D. Diet supplementation and fitness classes**

The combination of pain-free active range of motion is crucial for the rehabilitation process and contributes significantly to increasing muscular strength, power, and endurance in athletes. This approach allows the athlete to safely engage in movements that promote blood flow and tissue healing while minimizing the risk of re-injury or exacerbating existing injuries. By maintaining an active range of motion without pain, individuals can strengthen the muscles surrounding the injured area and improve overall mobility. This proactive engagement helps build endurance and fosters muscle conditioning essential for recovery and return to full athletic performance. Additionally, performing movements in a pain-free manner encourages neuromuscular coordination and helps athletes regain confidence in their abilities. Other approaches, such as pain management and emotional support or rest and relaxation techniques, may play supportive roles in the rehabilitation process but do not directly contribute to enhancing muscular strength, power, and endurance as effectively as maintaining an active range of motion.

8. What movement is defined as turning the palm up?

- A. Pronation**
- B. Elevation**
- C. Supination**
- D. Retraction**

Turning the palm up is defined as supination. This movement involves rotating the forearm in such a way that the palm faces upward or forward, depending on the position of the body. Supination occurs when the radius and ulna bones of the forearm are parallel to each other, which allows the palm to turn upwards. This movement is essential in various activities, such as holding food items or objects with the palm facing up, and plays a vital role in many exercises and functional movements in sports medicine. In contrast, pronation is the opposite movement where the palm faces downward. Elevation refers to moving a body part superiorly, such as shrugging the shoulders. Retraction involves moving a body part, typically the scapula, towards the midline of the body. Each of these movements has distinct characteristics and applications, making supination the correct term for turning the palm up.

9. How is caloric balance calculated?

- A. Calories consumed divided by calories expended**
- B. Calories expended plus calories consumed**
- C. Calories consumed minus calories expended**
- D. Calories consumed multiplied by calories expended**

Caloric balance is assessed by understanding the relationship between the calories a person consumes through food and drink and the calories they expend through metabolic processes and physical activity. The calculation is made by subtracting the total calories expended from the total calories consumed. When the result is positive, it indicates a caloric surplus, meaning the individual is taking in more calories than they are burning, which can lead to weight gain. Conversely, a negative result signifies a caloric deficit, where the individual is burning more calories than they consume, which can lead to weight loss. This approach assists in evaluating weight management, metabolism, and overall energy expenditure, making option three the correct choice in representing caloric balance accurately.

10. What is the last stage of the depression cycle following an injury?

- A. Depression**
- B. Acceptance**
- C. Bargaining**
- D. Anger**

The last stage of the depression cycle following an injury is acceptance. This stage is critical in the emotional healing process, allowing individuals to acknowledge their situation and come to terms with the changes that have occurred due to the injury. In acceptance, the individual begins to find a new normal and may set new goals or adapt existing ones based on their current capabilities. It signifies a shift from focusing on what has been lost to recognizing what can still be achieved in the future, promoting a sense of hope and motivation for recovery. Understanding this stage can help healthcare providers support individuals effectively as they navigate their recovery journey, guiding them toward psychological resilience and fostering a positive outlook despite challenges.