Mastectomy Fitter Practice Exam (Sample)

Study Guide

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Questions

1. Which muscle type is striated and can be controlled voluntarily?

- **A. Skeletal muscle**
- **B. Cardiac muscle**
- **C. Smooth muscle**
- **D. Involuntary muscle**

2. What is the anatomical term for the endpoint or connection of a tendon to a bone?

- **A. insertion**
- **B. origin**
- **C. articulation**
- **D. connection**

3. What type of blood vessel carries blood without oxygen and nutrients from surrounding tissues back to the heart?

- **A. Artery**
- **B. Capillary**
- **C. Vein**
- **D. Venule**

4. What do you call the bones that make up the extremities?

- **A. Axial Skeleton**
- **B. Appendicular Skeleton**
- **C. Cortical Skeleton**
- **D. Peripheral Skeleton**

5. Which term refers to an indication of a patient's medical condition observed during physical examination?

- **A. Sign**
- **B. Symptom**
- **C. Diagnosis**
- **D. Evaluation**

6. What term describes other problems or conditions that may look similar to the existing condition?

- **A. Primary diagnosis**
- **B. Differential diagnosis**
- **C. Secondary diagnosis**
- **D. Concurrent diagnosis**

7. Which type of muscle is primarily involuntary and non-striated?

- **A. Skeletal muscle**
- **B. Cardiac muscle**
- **C. Smooth muscle**
- **D. Voluntary muscle**

8. What is one way to enhance a patient's confidence post-mastectomy?

- **A. Encouraging them to avoid social situations**
- **B. Offering options that reflect their personal style and comfort**
- **C. Suggesting they hide their prosthesis**
- **D. Recommending heavy garments for concealment**

9. Which plane is described as being parallel to the median plane?

- **A. Coronal plane**
- **B. Transverse plane**
- **C. Sagittal plane**
- **D. Midsagittal plane**

10. What is inflammation of a tendon at its insertion called?

- **A. insertional tendonitis**
- **B. achilles tendonitis**
- **C. rotator cuff injury**
- **D. bursitis**

Answers

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

Explanations

1. Which muscle type is striated and can be controlled voluntarily?

A. Skeletal muscle

B. Cardiac muscle

C. Smooth muscle

D. Involuntary muscle

Skeletal muscle is the type of muscle that is striated and under voluntary control. This means that an individual can consciously contract these muscles to perform movements, such as lifting objects or walking. The striated appearance of skeletal muscle is due to the organized arrangement of proteins within the muscle fibers, creating a pattern of light and dark bands. This structural feature is characteristic of skeletal muscle, distinguishing it from other types of muscle. In contrast, cardiac muscle, which is also striated, is not under voluntary control, as it operates automatically to pump blood throughout the body. Smooth muscle, found in the walls of hollow organs, is non-striated and also involuntary, meaning it functions without conscious control. Lastly, the term "involuntary muscle" typically refers to smooth and cardiac muscle types, which do not respond to voluntary commands. Therefore, the identification of skeletal muscle as the correct answer emphasizes its unique characteristics of being striated and voluntarily controlled.

2. What is the anatomical term for the endpoint or connection of a tendon to a bone?

A. insertion

B. origin

C. articulation

D. connection

The anatomical term for the endpoint or connection of a tendon to a bone is known as the insertion. This terminology is derived from the study of anatomy, where tendons attach muscles to bones, allowing for movement when muscles contract. The insertion point is typically located at the distal or far end of the muscle, where it exerts force on the bone to produce movement at a joint. In the context of human anatomy, understanding the distinction between insertion and origin is vital. The origin refers to the anchored or fixed point where the muscle begins, usually closer to the body's midline or a more stationary bone, while the insertion is the point at which the muscle engages and moves the associated bone. This relationship is crucial in biomechanics and physiotherapy for assessing and rehabilitating movement. Articulation refers to the junction at which two bones meet, primarily involving the joints, while connection is a more generalized term that doesn't specifically define the biological relationship between muscles and bones. Therefore, insertion accurately defines the specific anatomical relationship that describes how muscles interact with bones via tendons.

3. What type of blood vessel carries blood without oxygen and nutrients from surrounding tissues back to the heart?

A. Artery

B. Capillary

C. Vein

D. Venule

Veins are the type of blood vessels responsible for carrying deoxygenated blood, which lacks oxygen and essential nutrients, away from the body tissues and back to the heart. The primary function of veins is to return blood after it has delivered its oxygen and nutrients to the cells and collected waste products. In the circulatory system, once the blood has traveled through the arteries and reached the capillaries, the exchange of gases and nutrients occurs. After this exchange, the blood, now depleted of oxygen and filled with carbon dioxide and metabolic waste, enters the venous system. Veins feature thinner walls compared to arteries, allowing them to expand to accommodate varying volumes of blood. They also have one-way valves that prevent the backflow of blood, ensuring that it continues towards the heart. Capillaries serve as the sites of exchange between blood and tissues but do not carry blood themselves; they are tiny blood vessels linking arteries and veins. Venules are small blood vessels that collect blood from capillaries and channel it into veins, but they do not carry blood independently back to the heart. Meanwhile, arteries are responsible for transporting oxygenated blood away from the heart to the tissues. Thus, veins are uniquely suited to the task of returning deoxygenated

4. What do you call the bones that make up the extremities?

A. Axial Skeleton

B. Appendicular Skeleton

C. Cortical Skeleton

D. Peripheral Skeleton

The bones that make up the extremities are referred to as the appendicular skeleton. This terminology is derived from the idea that these bones are associated with the limbs or "appendages" of the body, which include the arms and legs. The appendicular skeleton comprises the bones of the shoulder girdle, upper limbs, pelvic girdle, and lower limbs. In contrast, the axial skeleton consists of the bones along the body's long axis, including the skull, vertebral column, and rib cage. The other terms, "cortical skeleton" and "peripheral skeleton," do not represent recognized classifications in skeletal anatomy. Cortical bone refers to the dense outer surface of bone, whereas peripheral skeleton is not a standard term in this context. Understanding these classifications is essential for grasping how bones are organized and function within the body.

5. Which term refers to an indication of a patient's medical condition observed during physical examination?

A. Sign

B. Symptom

C. Diagnosis

D. Evaluation

The term that refers to an indication of a patient's medical condition observed during a physical examination is "sign." Signs are objective findings that can be measured or observed by a healthcare provider, such as a rash, swelling, or abnormal heart sounds. These indicators provide valuable information about the patient's condition and help guide further assessments and treatment options. In contrast, symptoms are subjective experiences reported by the patient, such as pain or fatigue, which cannot be directly observed by the examiner. A diagnosis is the conclusion drawn by the healthcare provider based on the signs and symptoms presented, leading to the identification of a specific medical condition. Evaluation refers to the overall assessment process of the patient's health, incorporating various data points, including both signs and symptoms, but it does not specifically denote the observable indicators alone. Thus, "sign" is the correct term that aligns with the observation of a patient's medical condition during a physical examination.

6. What term describes other problems or conditions that may look similar to the existing condition?

A. Primary diagnosis

B. Differential diagnosis

C. Secondary diagnosis

D. Concurrent diagnosis

The term that describes other problems or conditions that may appear similar to the existing condition is differential diagnosis. This concept is essential in clinical practice as it involves the systematic comparison and contrast of different conditions that could potentially explain a patient's symptoms. By considering a range of possibilities, healthcare professionals can narrow down the diagnosis to the most accurate one. Differential diagnosis serves as a critical component of patient assessment because it allows for a comprehensive understanding of various potential issues, ensuring that the patient receives the appropriate treatment. It involves evaluating the patient's history, symptoms, and diagnostic test results to rule out conditions that may mimic the primary issue. This method is particularly valuable in ensuring no critical condition is overlooked, enhancing patient safety and treatment efficacy. In contrast, the other options refer to different aspects of diagnosis. A primary diagnosis identifies the main condition being treated. A secondary diagnosis refers to additional conditions that may coexist alongside the primary diagnosis but are not the main focus of treatment. Concurrent diagnosis indicates conditions present at the same time as the primary condition but doesn't specifically emphasize the similarity aspect that differential diagnosis does. Understanding the nuances of these terms helps in accurately determining patient care plans.

7. Which type of muscle is primarily involuntary and non-striated?

A. Skeletal muscle

B. Cardiac muscle

C. Smooth muscle

D. Voluntary muscle

The correct answer is smooth muscle, which is primarily involuntary and non-striated. Smooth muscle tissue is found in the walls of hollow organs, such as the intestines, bladder, and blood vessels. Unlike skeletal muscle, which is under voluntary control and has a striated appearance due to its organized fiber structure, smooth muscle operates autonomously, meaning its contractions occur without conscious effort. This muscle type plays a crucial role in facilitating various bodily functions, such as digestion and the regulation of blood flow. The lack of striations in smooth muscle fibers is due to the arrangement of the actin and myosin filaments, which are not organized into sarcomeres as they are in skeletal and cardiac muscles. The unique properties of smooth muscle allow it to sustain prolonged contractions and respond to various stimuli, making it essential for involuntary processes in the body. Understanding smooth muscle's characteristics helps in recognizing its vital role in both health and disease processes, distinguishing it from the other muscle types that may have different structural and functional attributes.

8. What is one way to enhance a patient's confidence post-mastectomy?

A. Encouraging them to avoid social situations

B. Offering options that reflect their personal style and comfort

C. Suggesting they hide their prosthesis

D. Recommending heavy garments for concealment

Offering options that reflect a patient's personal style and comfort is vital in enhancing their confidence post-mastectomy. After such a significant surgical procedure, patients often experience changes in their body image and may feel self-conscious about their appearance. By providing choices that resonate with their individual tastes and preferences, it allows them to have a sense of control and ownership over their new look. When patients feel that they can express themselves through clothing and prosthesis choices that align with their identity and comfort level, it can significantly boost their self-esteem. The right fit and style can make a person feel more like themselves again and less focused on the physical changes they've undergone, fostering a positive mindset. In contrast, the other options do not support the emotional and psychological needs of a patient recovering from a mastectomy. Avoiding social situations or suggesting hiding the prosthesis can lead to feelings of isolation and shame, while recommending heavy garments for concealment may increase discomfort and reduce the ability to embrace their new reality. Therefore, providing personalized options is essential for supporting their emotional well-being and confidence.

9. Which plane is described as being parallel to the median plane?

A. Coronal plane

B. Transverse plane

C. Sagittal plane

D. Midsagittal plane

The midsagittal plane, which is typically the correct answer to the question regarding a plane parallel to the median plane, divides the body into equal left and right halves. The median plane is essentially the same as the midsagittal plane, making the description accurate. It runs vertically and aligns with the midline of the body. The sagittal plane, while also parallel to the median plane, does not necessarily refer to a plane that divides the body into equal sections. Instead, it can refer to any plane that runs parallel to the median and divides the body into unequal left and right parts. The other planes mentioned, such as the coronal and transverse planes, serve different functions and orientations; thus, they do not fit the criteria of being parallel to the median plane. The distinction between these planes is crucial in fields like anatomy and medical imaging, where precise terminology is relevant for clarity in communication and understanding anatomical relationships.

10. What is inflammation of a tendon at its insertion called?

A. insertional tendonitis

B. achilles tendonitis

C. rotator cuff injury

D. bursitis

The term "insertional tendonitis" specifically refers to the inflammation of a tendon at its point of attachment to a bone. This condition can occur in various tendons throughout the body, including those in the shoulder, elbow, knee, and ankle, where the tendon fibers become irritated and inflamed. This inflammation often results from repetitive stress or acute injury, leading to pain and discomfort during movement. Insertional tendonitis is characterized by localized pain and tenderness at the tendon insertion site, which distinguishes it from other types of tendonitis that may occur within the body of the tendon itself rather than at the point of attachment. It is important to identify this condition accurately in order to implement appropriate treatment options, such as rest, ice application, physical therapy, or, in some cases, surgical intervention. In contrast, other options refer to specific types of tendonitis or conditions. For example, "Achilles tendonitis" specifically involves the Achilles tendon and is a type of insertional tendonitis, but it does not encompass tendonitis of other tendons. "Rotator cuff injury" refers to a broader category of shoulder injuries related to the rotator cuff muscles and tendons, while "bursitis" pertains to inflammation of the bursa, which