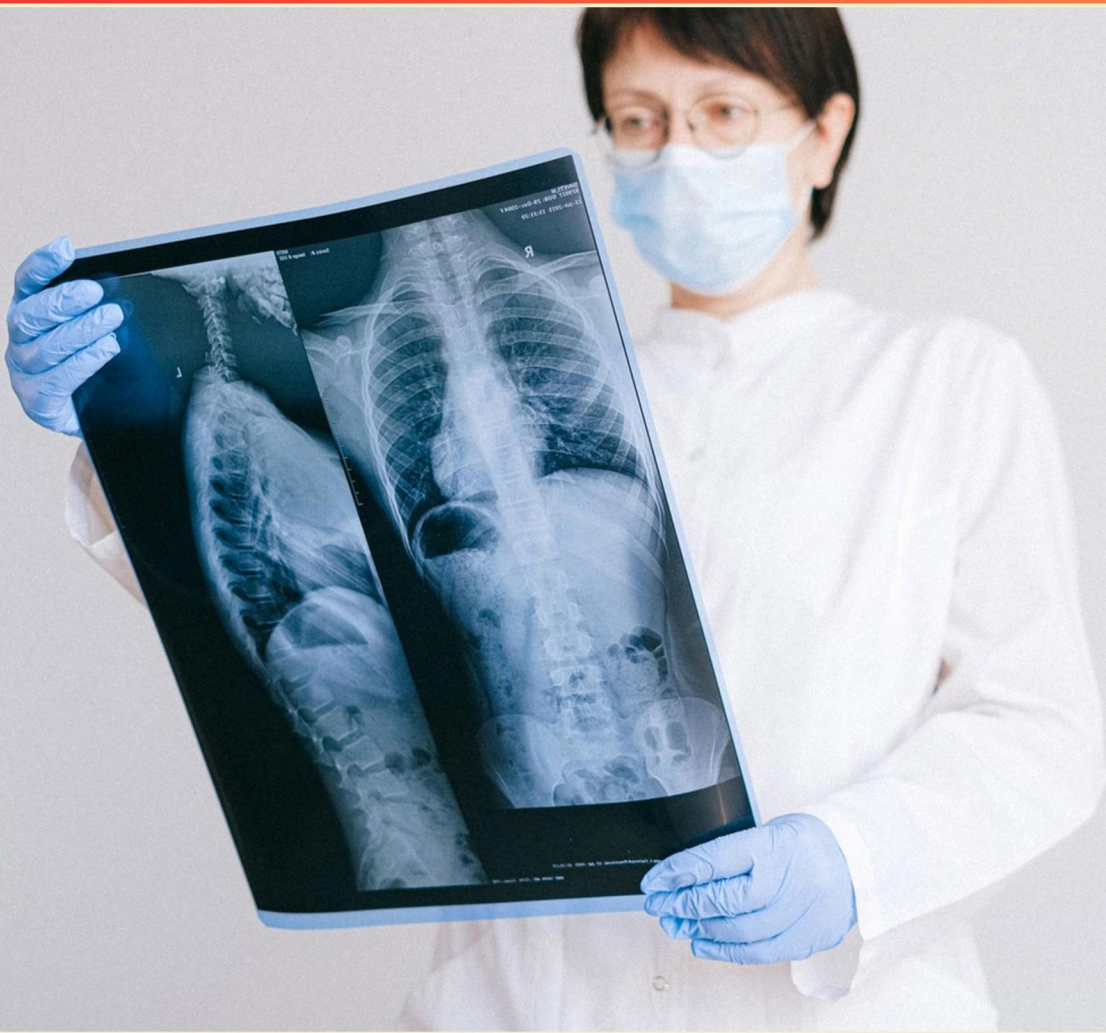


MOSBY RADIOGRAPHY PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://mosbyradiography.examzify.com>



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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

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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. Hypovolemic shock is primarily caused by which of the following?**
 - A. Loss of a large amount of blood or fluid
 - B. Heart rhythm disturbances
 - C. Infection and toxins in the bloodstream
 - D. Allergic reaction

- 2. Effective dose limits may be found in which published material?**
 - A. Dose limit reports
 - B. NCRP reports
 - C. Environment Protection Agency reports
 - D. Health and Human Services reports

- 3. ALARA stands for which safety principle?**
 - A. As Low As Reasonably Achievable
 - B. All Levels Are Reduced Accordingly
 - C. Always Limit And Reduce Absorption
 - D. Average Levels Are Readily Accessible

- 4. Shock is indicated when the diastolic blood pressure is:**
 - A. Greater than 100 mm Hg
 - B. Less than 60 mm Hg
 - C. Greater than 90 mm Hg
 - D. Less than 50 mm Hg

- 5. The process of somatic cell division is called:**
 - A. Mitosis
 - B. Spermatogenesis
 - C. Organogenesis
 - D. Cytogenesis

- 6. Which landmark is identified as Structure E in the hip region?**
 - A. Acetabulum
 - B. Ischial tuberosity
 - C. Greater trochanter
 - D. Lesser trochanter

7. In computed radiography, which term describes the three-dimensional element mapped by a digital image pixel?
- A. Pathology
 - B. Density
 - C. Voxel
 - D. Artifact
8. The annual effective dose limit for the general public, assuming frequent exposure, is which value?
- A. 0.5 mSv
 - B. 500 mSv
 - C. 0.05 mSv
 - D. 1.0 mSv
9. The focusing cup is located at the:
- A. Cathode
 - B. Anode
 - C. X-ray tube window
 - D. Control panel
10. In the hand anatomy, Structure I corresponds to which joint in the provided mappings?
- A. Second proximal interphalangeal joint
 - B. First carpometacarpal joint
 - C. Second distal interphalangeal joint
 - D. Second metacarpophalangeal joint

Answers

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

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Explanations

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1. Hypovolemic shock is primarily caused by which of the following?

- A. Loss of a large amount of blood or fluid**
- B. Heart rhythm disturbances
- C. Infection and toxins in the bloodstream
- D. Allergic reaction

Hypovolemic shock occurs when there isn't enough circulating blood volume to properly fill the vascular system, so the heart can't maintain adequate pressure and tissue perfusion. This happens most often after losing a large amount of blood or fluids, such as from hemorrhage, severe dehydration, burns, or ongoing fluid losses. With the reduced volume, venous return to the heart drops, stroke volume and cardiac output decrease, and blood pressure falls. The body may try to compensate with faster heart rate and vasoconstriction, but organ perfusion remains compromised. Other scenarios involve different mechanisms: heart rhythm disturbances can reduce the heart's pumping efficiency but are not the primary cause of hypovolemia. Infection and toxins in the bloodstream lead to septic shock, characterized by systemic vasodilation and increased capillary permeability. An allergic reaction can cause anaphylactic shock, also involving vasodilation and fluid leakage.

2. Effective dose limits may be found in which published material?

- A. Dose limit reports
- B. NCRP reports**
- C. Environment Protection Agency reports
- D. Health and Human Services reports

Effective dose limits are guided by authoritative organizations that translate international recommendations into practical limits for practice. The NCRP (National Council on Radiation Protection and Measurements) publishes comprehensive reports that summarize and tailor dose-limit recommendations for occupational, medical, and public exposure in the United States. These NCRP reports provide the specific numerical limits and the framework used to monitor and optimize radiation exposure, making them the primary published material you'd refer to for effective dose limits in radiography. Other sources like EPA publications, HHS materials, or vague "dose limit reports" aren't the standard references for these numeric limits. EPA focuses on environmental radiation protection, HHS covers broad health policy, and a generic label doesn't represent a formal, widely used set of dose-limit guidelines.

3. ALARA stands for which safety principle?

- A. As Low As Reasonably Achievable**
- B. All Levels Are Reduced Accordingly
- C. Always Limit And Reduce Absorption
- D. Average Levels Are Readily Accessible

ALARA means keeping radiation exposure as low as reasonably achievable. This principle guides every radiography task to minimize dose without compromising diagnostic quality, balancing effort, cost, and practicality. In practice, it means using the lowest acceptable technique, precise collimation to limit the beam, appropriate shielding, avoiding repeats by proper positioning, and leveraging dose-saving features of the equipment. The other phrases don't reflect this protective philosophy and refer to concepts that aren't about reducing radiation exposure in a practical, justified way.

4. Shock is indicated when the diastolic blood pressure is:

- A. Greater than 100 mm Hg
- B. Less than 60 mm Hg
- C. Greater than 90 mm Hg
- D. Less than 50 mm Hg**

When evaluating shock, the central issue is inadequate tissue perfusion due to very low arterial pressure. Diastolic pressure reflects the pressure in the arteries between heartbeats and is influenced by systemic vascular resistance. If diastolic pressure falls below about 50 mmHg, the perfusion pressure between beats becomes critically low, making organ perfusion unlikely and aligning with shock physiology. In clinical terms, a mean arterial pressure around 60 mmHg or lower often accompanies this level of diastolic drop, signaling the need for rapid intervention. Among the given options, diastolic pressure less than 50 mmHg is the indicator most consistent with severe hypotension and shock. The other values indicate normal or high pressures or only milder hypotension that does not by itself define shock.

5. The process of somatic cell division is called:

- A. Mitosis**
- B. Spermatogenesis
- C. Organogenesis
- D. Cytogenesis

Somatic cell division is mitosis. This process handles the division of non-reproductive cells, producing two genetically identical diploid daughter cells and preserving the chromosome number so tissues can grow, be maintained, and repaired. Mitosis includes stages that evenly separate the duplicated chromosomes, followed by cytokinesis that splits the cytoplasm. It is distinct from meiosis, which occurs in germ cells to produce haploid gametes. Spermatogenesis is a meiotic process forming sperm, organogenesis refers to the development of organs during embryogenesis, and cytogenesis isn't the standard term used for somatic division.

6. Which landmark is identified as Structure E in the hip region?

- A. Acetabulum
- B. Ischial tuberosity
- C. Greater trochanter
- D. Lesser trochanter**

The structure labeled E is the lesser trochanter. This small, posteromedial projection sits on the proximal femur just below the neck and serves as the tendon insertion for the iliopsoas muscle, which helps flex the hip. Its location is distinct from other nearby landmarks: the acetabulum is the hip socket on the pelvis, the greater trochanter is a larger lateral prominence on the proximal femur for gluteal muscle attachments, and the ischial tuberosity is a lower, posterior part of the pelvis you sit on. The lesser trochanter's medial and inferior position on the femur makes it the clear match for Structure E.

7. In computed radiography, which term describes the three-dimensional element mapped by a digital image pixel?

- A. Pathology
- B. Density
- C. Voxel**
- D. Artifact

In digital radiography, a pixel is a two-dimensional element, but the image data correspond to a volume in the object. The three-dimensional element described by a digital image pixel is a voxel, which stands for a volumetric pixel and represents a small volume of tissue whose attenuation contributes to the pixel's brightness. This voxel concept is why the image appears as a 2D grid even though it conveys information about a 3D structure. Pathology and artifact are not geometric elements of the image, and density refers to the brightness or attenuation value shown, not the 3D element itself.

8. The annual effective dose limit for the general public, assuming frequent exposure, is which value?

- A. 0.5 mSv
- B. 500 mSv
- C. 0.05 mSv
- D. 1.0 mSv**

The main idea here is regulatory protection for people who are not workers. For the general public, the allowed annual effective dose from all controllable radiation exposure, when exposure is frequent, is 1 mSv per year. This limit is intentionally low to keep cancer risk from radiation of everyday life very small, and it sits below the occupational limit (which is higher because workers have more exposure tolerance and screening). Among the given options, 1.0 mSv matches this public exposure limit. The other values don't fit: 0.5 mSv is below the standard public limit and not the accepted annual limit, 0.05 mSv is far too small, and 500 mSv would be far beyond any public safety guideline.

9. The focusing cup is located at the:

- A. Cathode**
- B. Anode
- C. X-ray tube window
- D. Control panel

The focusing cup is located at the cathode. It sits around the heated filament inside the cathode assembly and is negatively charged to shape the electric field, directing electrons toward the anode target for a tight, well-defined beam. This electrostatic focusing helps produce a sharper focal spot on the anode and reduces beam divergence. The anode is the positive electrode where X-rays are produced; the tube window is simply the exit area for X-rays; the control panel is outside the tube for operating the unit.

10. In the hand anatomy, Structure I corresponds to which joint in the provided mappings?

A. Second proximal interphalangeal joint

B. First carpometacarpal joint

C. Second distal interphalangeal joint

D. Second metacarpophalangeal joint

Structure I is at the joint between the proximal and middle phalanges of the index finger, which is the proximal interphalangeal joint. This hinge joint allows flexion and extension of the finger's middle segment. The other options describe different joints: the base-of-thumb carpometacarpal joint, the interphalangeal joint between middle and distal phalanges, and the metacarpophalangeal joint between the index finger's proximal phalanx and the second metacarpal. The position of Structure I fits the proximal interphalangeal joint of the index finger.

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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://mosbyradiography.examzify.com>

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

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