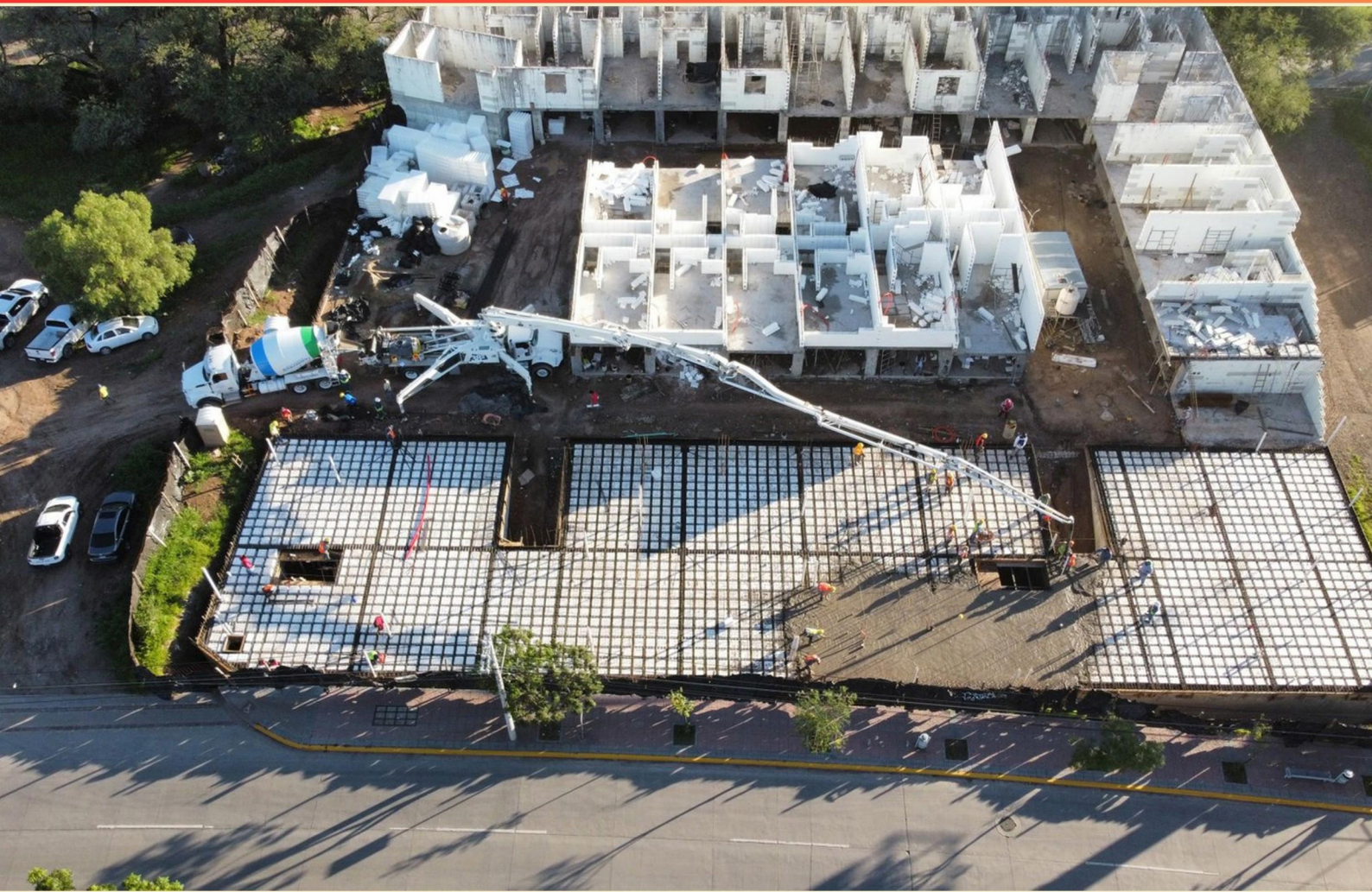


RECONSTRUCTION 101 PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

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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. The transverse ligament of the knee connects which structures?

- A. Medial and Lateral Menisci
- B. Anterior and Posterior Cruciate Ligaments
- C. Medial and Lateral Collateral Ligaments
- D. Patella and Tibial Tuberosity

2. What is the lesser trochanter?

- A. A bony prominence on the proximal lateral side of the thigh, just below the hip joint
- B. The distance between the femoral axis and the center of the femoral head
- C. The narrow area just below the head of the femur
- D. The projection on the medial/superior portion of the femur

3. What data are necessary for CORI to determine the mechanical axis?

- A. Hip Center only
- B. Ankle Center only
- C. Knee Center; Hip Center
- D. Ankle Center; Knee Center; Hip Center

4. What is the size range of the R3 3-hole shell?

- A. 40 to 68
- B. 30 to 60
- C. 50 to 90
- D. 60 to 100

5. The angle of the LEGION jointline in the frontal plane is ____ degrees.

- A. 0 Degrees
- B. -1 Degree
- C. 1 Degree
- D. 2 Degrees

- 6. What are the three size groupings for the JOURNEY II UK femoral lug placement?**
- A. 0-2, 3-6, 7-9
 - B. 1-2, 3-5, 6-8
 - C. 2-4, 5-7, 8-10
 - D. 1-3, 4-7, 8-10
- 7. The patellofemoral groove articulates with which structure?**
- A. Patellofemoral Groove
 - B. Trochlear groove
 - C. Patella
 - D. Tibial Plateau
- 8. Which part of the acetabulum forms its lower margin?**
- A. Acetabular Roof
 - B. Acetabular Floor
 - C. Pelvic Inlet
 - D. Pubic Symphysis
- 9. Where is the tibia knee center data point defined?**
- A. Center of the ACL bundle
 - B. Center of the MCL
 - C. Center of the PCL
 - D. Center of the tibial plateau
- 10. What reference lines are visible during femur axis definition?**
- A. AP Axis/Whiteside's Line
 - B. Posterior Condylar Axis
 - C. TransEpicondylar Axis
 - D. All of the above

Answers

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

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Explanations

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1. The transverse ligament of the knee connects which structures?

- A. Medial and Lateral Menisci**
- B. Anterior and Posterior Cruciate Ligaments
- C. Medial and Lateral Collateral Ligaments
- D. Patella and Tibial Tuberosity

The transverse ligament of the knee links the anterior parts (horns) of the medial and lateral menisci. It runs across the front area of the tibial plateau, holding the two menisci together so they move as a unit during knee motion. This attachment is specific to the menisci and is not involved with the cruciate ligaments, collateral ligaments, or the patellar-tibial attachment, which is why the correct pairing is the two menisci.

2. What is the lesser trochanter?

- A. A bony prominence on the proximal lateral side of the thigh, just below the hip joint
- B. The distance between the femoral axis and the center of the femoral head
- C. The narrow area just below the head of the femur
- D. The projection on the medial/superior portion of the femur**

This question tests your knowledge of where the lesser trochanter sits on the femur. The lesser trochanter is a projection on the medial aspect of the proximal femur, located just below the femoral neck on the posteromedial surface. It serves as the attachment site for the iliopsoas muscle. This description matches the option that refers to a projection on the medial side of the proximal femur, making it the best choice. The other descriptions refer to different landmarks: a lateral, proximal prominence describes the greater trochanter; the narrow area below the head is the femoral neck; and a distance between the shaft axis and the head center describes a measurement, not a bony prominence.

3. What data are necessary for CORI to determine the mechanical axis?

- A. Hip Center only
- B. Ankle Center only
- C. Knee Center; Hip Center
- D. Ankle Center; Knee Center; Hip Center**

The main idea is that the mechanical axis is the straight line carrying the body's weight across the leg, typically drawn from the hip joint center to the ankle joint center. In CORI, pinpointing that axis accurately in 3D requires knowing all three joint centers: hip, knee, and ankle. The hip and ankle centers establish the endpoints of the line, while the knee center anchors the line within the knee region to ensure the axis truly passes through the knee joint center and aligns with the leg's geometry. Including the knee center helps validate and refine the axis, especially when marker placement or soft tissue movement could introduce errors. So, having hip center, knee center, and ankle center together gives a robust, accurate determination of the mechanical axis.

4. What is the size range of the R3 3-hole shell?

- A. 40 to 68**
- B. 30 to 60
- C. 50 to 90
- D. 60 to 100

The size range shows the allowable variation in the shell's dimensions that still lets it fit and function in its system. For the R3 3-hole shell, the specified range is 40 to 68. That means any shell whose dimension falls within this interval will be compatible; dimensions below 40 or above 68 would not meet the required fit and could cause misalignment or interference. The numbers reflect the standard unit used in this context, and this range matches the official spec for this shell. Other ranges would either be too small or too large, leading to improper fit.

5. The angle of the LEGION jointline in the frontal plane is ____ degrees.

- A. 0 Degrees
- B. -1 Degree
- C. 1 Degree**
- D. 2 Degrees

A knee joint line in the frontal plane is not perfectly flat in most people; there's a tiny natural tilt due to how the femur and tibia align. This near-neutral alignment typically shows about one degree of obliquity. That's why the best answer is a small tilt of around 1 degree—it reflects the common, normal slight incline seen in many individuals. A perfectly flat joint line (0 degrees) is less realistic for most anatomy, while a tilt of -1 degree or 2 degrees represents a bigger deviation from what's usually observed and isn't considered normal variation.

6. What are the three size groupings for the JOURNEY II UK femoral lug placement?

- A. 0-2, 3-6, 7-9
- B. 1-2, 3-5, 6-8
- C. 2-4, 5-7, 8-10
- D. 1-3, 4-7, 8-10**

The main idea is that lug placement is matched to the size of the distal femur. For the JOURNEY II UK femoral component, there are three size groupings of lug positions to fit different bone sizes and keep the implant seated securely with proper alignment. The three ranges are 1-3, 4-7, and 8-10, corresponding to small, medium, and large femoral sizes. Choosing the group that matches the patient's anatomy helps ensure the lugs engage correctly for stable fixation and proper knee kinematics. Using the wrong group can lead to poor seating, potential malalignment, or compromised fixation.

7. The patellofemoral groove articulates with which structure?

- A. Patellofemoral Groove
- B. Trochlear groove
- C. Patella**
- D. Tibial Plateau

The patellofemoral groove is the groove on the femur (the trochlear groove) that forms the patellofemoral joint with the patella. The posterior surface of the patella sits in that groove and glides along it as the knee flexes and extends. So the structure that articulates with the patellofemoral groove is the patella. The tibial plateau isn't part of this joint, and the trochlear groove is essentially the same groove on the femur, not the structure that articulates with it.

8. Which part of the acetabulum forms its lower margin?

- A. Acetabular Roof
- B. Acetabular Floor**
- C. Pelvic Inlet
- D. Pubic Symphysis

The acetabulum is a cup-shaped socket with a defined rim, where the bottom interior surface forms its lower boundary. That interior bottom is the acetabular floor, which provides the lower margin of the socket and bears contact with the femoral head through the articular surface. The roof is the superior part of the socket, built mainly by the iliac portion, while the pelvic inlet and pubic symphysis are not part of the acetabular margins. So the lower margin is formed by the acetabular floor.

9. Where is the tibia knee center data point defined?

- A. Center of the ACL bundle**
- B. Center of the MCL
- C. Center of the PCL
- D. Center of the tibial plateau

In knee motion analysis, the tibia knee center data point is defined at the center of the ACL bundle. This central location lines up with the knee's main path of motion and provides a stable, repeatable reference across different knee flexion angles, which is why it's used for tibial tracking in navigation and biomechanical studies. The MCL and PCL centers are further from the knee's primary axis and can shift with angle, making them less reliable as a single reference point. The center of the tibial plateau is a surface landmark that doesn't correspond to the joint's functional center, so it's not as consistent for defining the tibial data point.

10. What reference lines are visible during femur axis definition?

- A. AP Axis/Whiteside's Line
- B. Posterior Condylar Axis
- C. TransEpicondylar Axis
- D. All of the above**

When defining the femur's rotational axis, you rely on several landmarks that can be seen on the bone or on imaging. Whiteside's line, the anteroposterior axis, runs from the deepest part of the trochlear groove to the center of the intercondylar notch and helps set the front-to-back orientation of the femur. The posterior condylar axis is a line tangent to the posterior aspects of the femoral condyles and serves as a practical reference from the back of the knee. The transepicondylar axis connects the most prominent points of the medial and lateral epicondyles and closely approximates the knee's natural flexion-extension axis. Since each landmark can be identified and used to gauge femoral rotation, all of them are visible and useful in defining the axis. In practice, surgeons often use the transepicondylar axis as a primary reference, with Whiteside's line and the posterior condylar axis providing cross-checks for anatomical variation.

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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://recon101.examzify.com>

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

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