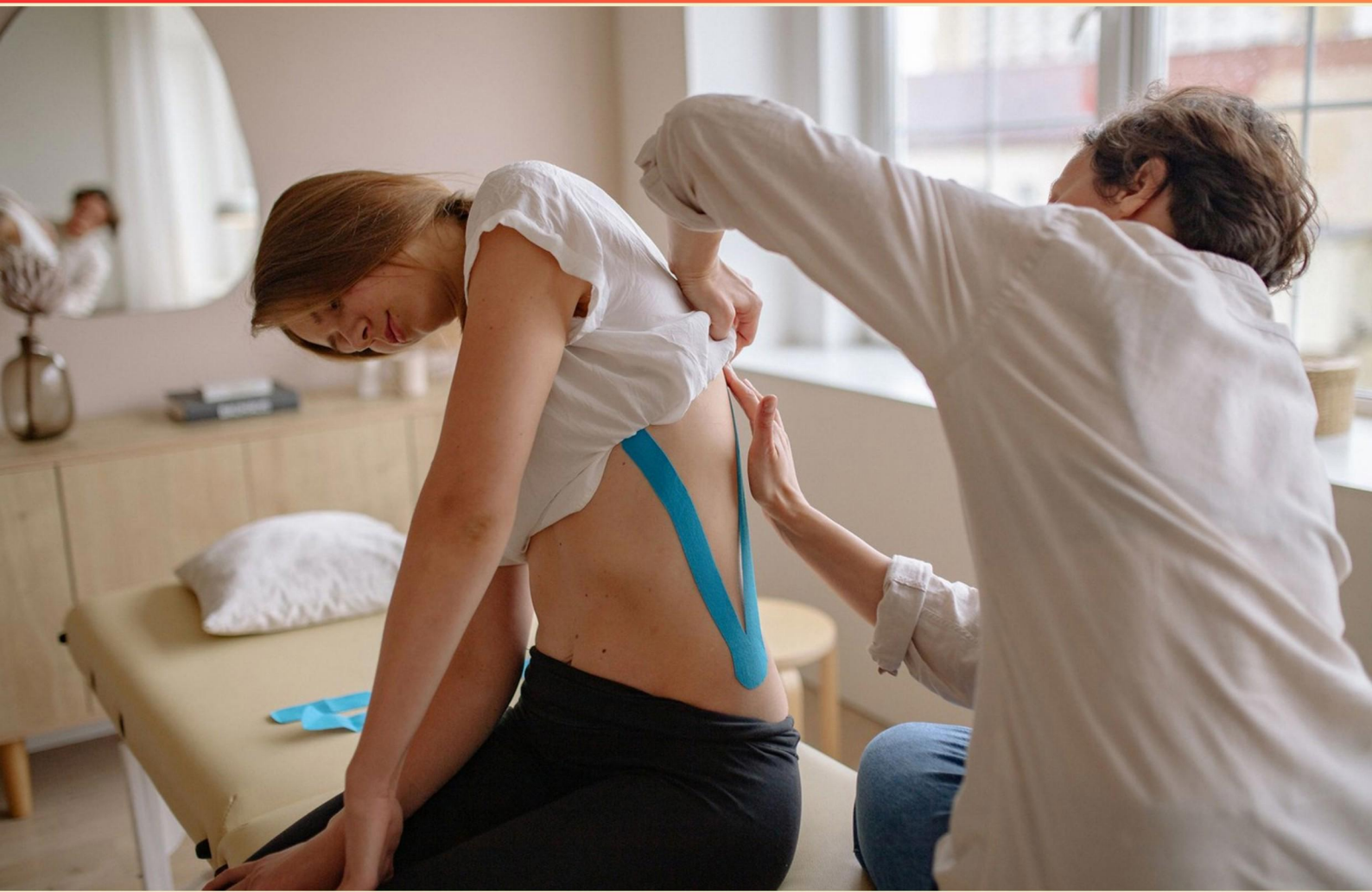


SUBLUXATION PRACTICE TEST (SAMPLE)

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. Deep tendon reflexes are primarily evaluated as part of which pathology category?**
 - A. Instrumentation
 - B. Neuropathology
 - C. Histopathology
 - D. Myopathology
- 2. Which of the following is a possible atlas listing on a lateral cervical view?**
 - A. AS or AI
 - B. AS or PS
 - C. AI or PI
 - D. PS or AI
- 3. In an APOM view, which description matches the occiput findings?**
 - A. occiput- Left/Right; Anterior/Posterior
 - B. occiput- Left/Right; Medial/Lateral
 - C. occiput- LS/RS; LA/LP/RA/RP
 - D. occiput- Superior/Inferior
- 4. Which of the following is NOT a static palpation component?**
 - A. Temperature
 - B. Skin
 - C. Edema
 - D. Palpable tenderness
- 5. Which describes the probe width orientation for the thoracolumbar glide?**
 - A. Parallel to outward
 - B. Perpendicular to midline
 - C. Parallel to inward
 - D. Diagonal to bed
- 6. Electromyography is observed in which pathology category?**
 - A. Histopathology
 - B. Instrumentation
 - C. Myopathology
 - D. Neuropathology

7. Which range corresponds to 'Lower 25% of spinous of involved segment'?

- A. T4
- B. T10-12
- C. C2-T3
- D. L1-L5

8. Where should you start a thoracolumbar glide?

- A. T7
- B. C7
- C. L2
- D. C1

9. The cartesian coordinate system is a what hand system?

- A. Left Hand
- B. Right Hand
- C. Neutral
- D. Ambidextrous

10. Disruption of normal physiology is described by which VSC component?

- A. Neuropathology
- B. Pathobiochem
- C. Pathophysiology
- D. Histopathology

Answers

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

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Explanations

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1. Deep tendon reflexes are primarily evaluated as part of which pathology category?

- A. Instrumentation
- B. Neuropathology**
- C. Histopathology
- D. Myopathology

Deep tendon reflexes test the nervous system's reflex pathway, from muscle spindles through the spinal cord to the motor nerves and muscles. Because they reflect the integrity of peripheral nerves, nerve roots, and spinal circuits, they are evaluated within neuropathology. Absent or diminished reflexes point to peripheral nerve or lower motor neuron involvement, while exaggerated reflexes can indicate upper motor neuron issues—none of which would be primarily about tissue structure, muscle disease, or instrument use. The other categories focus on tissue histology, muscle pathology, or instrumentation, making neuropathology the most appropriate fit for what DTRs assess.

2. Which of the following is a possible atlas listing on a lateral cervical view?

- A. AS or AI
- B. AS or PS
- C. AI or PI**
- D. PS or AI

In a lateral cervical radiograph, atlas listings describe two aspects of position: whether the atlas sits anterior or posterior to the skull base, and whether that position is above or below a reference line. anatomically, the atlas sits below the skull, so a superior (above) relation isn't possible on this view. That means the only valid vertical component is inferior, leaving two possible combinations: anterior inferior or posterior inferior. Since the lateral view lets you see forward or backward shift (anterior vs posterior) and the atlas must be inferior, the two workable listings are anterior inferior and posterior inferior. The other pairings would require a superior relation, which doesn't occur in this view. So the correct option reflects AI or PI.

3. In an APOM view, which description matches the occiput findings?

- A. occiput- Left/Right; Anterior/Posterior
- B. occiput- Left/Right; Medial/Lateral
- C. occiput- LS/RS; LA/LP/RA/RP**
- D. occiput- Superior/Inferior

In an APOM view, the occiput is described using two directions to capture how the skull sits relative to the atlas on both sides. You assess which side of the occiput is shifted and whether that shift is toward the front (anterior) or back (posterior). That creates four regional descriptors: left anterior, left posterior, right anterior, right posterior. This two-axis, quadrant-style labeling lets you map rotational and tilt components at the craniovertebral junction, which is how the occiput often deviates in this projection. Other descriptions that use only a single axis (like just superior/inferior, or just medial/lateral) don't fully describe the two-dimensional nature of occipital alignment seen on APOM, so the four-quadrant left/right with anterior/posterior on each side best fits what APOM is documenting.

4. Which of the following is NOT a static palpation component?

- A. Temperature
- B. Skin
- C. Edema
- D. Palpable tenderness

Static palpation looks at tissue qualities as the area sits at rest. You're evaluating how the tissue feels in a resting state: the skin's condition and texture, the presence of swelling (edema), and tenderness that is detected through light touch. These characteristics reflect the static state of the tissues. Temperature, by contrast, is a dynamic physiologic sign. Warmth or coolness can change with inflammation, time of day, environmental conditions, and other factors, so it isn't a fixed tissue property you assess in a purely resting state. Because of that variability, temperature isn't categorized as a static palpation component, even though you may notice it during an examination.

5. Which describes the probe width orientation for the thoracolumbar glide?

- A. Parallel to outward
- B. Perpendicular to midline
- C. Parallel to inward
- D. Diagonal to bed

The probe width should be oriented parallel to outward because that direction aligns with the main plane in which the thoracolumbar segments glide during assessment. Running the probe this way keeps contact along the joint surfaces and surrounding tissues in their natural sliding direction, making it easier to feel subtle differences in motion or tissue tension from one segment to the next. If you aimed perpendicularly to the midline or toward the spine, you'd cross the joint plane awkwardly and lose sensitivity; a diagonal orientation to the bed would misalign with the actual glide path and distort what you're feeling.

6. Electromyography is observed in which pathology category?

- A. Histopathology
- B. Instrumentation
- C. Myopathology
- D. Neuropathology

Electromyography examines the electrical activity produced by muscle fibers and their innervation, offering direct insight into muscle tissue health. This makes it a key tool for assessing myopathies, where the problem lies in the muscle fibers themselves. In myopathic conditions, EMG typically shows small, short-duration motor unit potentials with early recruitment and often polyphasic shapes, reflecting primary muscle fiber dysfunction. In contrast, neuropathic patterns on EMG—such as motor units with enlarged amplitude and longer duration due to reinnervation, or reduced recruitment from nerve loss—point to nerve or nerve muscle interface issues rather than primary muscle disease. Histopathology focuses on microscopic tissue structure, and instrumentation denotes the method rather than the disease process, so EMG aligns best with myopathology because it reveals functional consequences of muscle fiber pathology.

7. Which range corresponds to 'Lower 25% of spinous of involved segment'?

- A. T4
- B. T10-12
- C. C2-T3
- D. L1-L5**

The concept here is using a specific landmark on the spinous process to locate the involved segment. The instruction "lower 25% of the spinous of the involved segment" means you're identifying the lower quarter of that spinous process as the reference point for the segment you're assessing or adjusting. In the lumbar region, the spinous processes are large, palpable, and extend so that their lower portions are cleanly felt along the midline. Because of this anatomy, the lower quarter of the spinous process lines up reliably with the lumbar levels from L1 through L5. The cervical region has short, bifid spinous processes, and the thoracic region's spinous processes angle downward and overlap with others, making a precise lower-quarter landmark less consistent there. So the range where the lower 25% landmark corresponds to the involved segment is the lumbar levels: L1–L5.

8. Where should you start a thoracolumbar glide?

- A. T7
- B. C7**
- C. L2
- D. C1

Begin at the boundary between the cervical and thoracic regions because you want a reliable anchor to track the glide into the thoracic and lumbar segments. C7, the vertebra prominens, marks where the thoracic spine starts and gives a clear reference point for initiating the thoracolumbar glide. Starting higher would miss the thoracic start, while starting lower would skip the upper thoracic area, so beginning at C7 ensures you guide the motion through the intended thoracolumbar region.

9. The cartesian coordinate system is a what hand system?

- A. Left Hand
- B. Right Hand**
- C. Neutral
- D. Ambidextrous

In a cartesian coordinate system, the orientation is right-handed. This is set by the right-hand rule: if you point your index finger along the positive x-axis and your middle finger along the positive y-axis, your thumb will point along the positive z-axis. In standard drawings, x goes to the right, y goes up, and z comes out of the page toward you, which matches the rule because $x \times y = z$. This convention keeps rotations and cross products consistent across math and physics; a left-handed system would flip the z-direction and change those relationships.

10. Disruption of normal physiology is described by which VSC component?

- A. Neuropathology
- B. Pathobiochem
- C. Pathophysiology
- D. Histopathology

Pathophysiology describes disruption of normal physiology. It explains how disease processes change how body systems work, focusing on functional consequences like impaired signaling, altered metabolism, or organ dysfunction. In the VSC framework, this captures the functional disturbances that arise from subluxation, not just structural or chemical changes. Neuropathology focuses on disease of nervous tissue, histopathology on tissue structure changes, and pathobiochemistry on biochemical alterations—areas that describe what changes occur at tissue or chemical levels rather than how functions are affected. So the term that best describes disruption of normal physiology is pathophysiology.

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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://subluxation.examzify.com>

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

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