Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

SKU: 9781630917234-TEST-BANK

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

Clinical Pathology for Athletic Trainers

Recognizing Systemic Disease

FOURTH EDITION

TEST BANK

REHAL A. BHOJANI, MD, CAQSM, FAAFP

Assistant Professor and Fellowship Director
Sports Medicine
UT Health Science Center Houston/IRONMAN Sports Medicine Institute
McGovern Medical School
Department of Orthopedic Surgery
Houston, Texas

DANIEL P. O'CONNOR, PHD, ATC

Dean
College of Liberal Arts and Social Sciences
University of Houston
Houston, Texas

A. LOUISE FINCHER, EDD, ATC, LAT

Dean
School of Health Sciences
Emory & Henry College
Emory, Virginia

SLACK INCORPORATED

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

www.slackbooks.com

Copyright © 2022 by SLACK Incorporated

All rights reserved. No part of this book may be reproduced, stored in a retrieval system or transmitted in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, without written permission from the publisher, except for brief quotations embodied in critical articles and reviews.

The procedures and practices described in this publication should be implemented in a manner consistent with the professional standards set for the circumstances that apply in each specific situation. Every effort has been made to confirm the accuracy of the information presented and to correctly relate generally accepted practices. The authors, editors, and publisher cannot accept responsibility for errors or exclusions or for the outcome of the material presented herein. There is no expressed or implied warranty of this book or information imparted by it. Care has been taken to ensure that drug selection and dosages are in accordance with currently accepted/recommended practice. Off-label uses of drugs may be discussed. Due to continuing research, changes in government policy and regulations, and various effects of drug reactions and interactions, it is recommended that the reader carefully review all materials and literature provided for each drug, especially those that are new or not frequently used. Some drugs or devices in this publication have clearance for use in a restricted research setting by the Food and Drug and Administration or FDA. Each professional should determine the FDA status of any drug or device prior to use in their practice.

Any review or mention of specific companies or products is not intended as an endorsement by the author or publisher.

SLACK Incorporated uses a review process to evaluate submitted material. Prior to publication, educators or clinicians provide important feedback on the content that we publish. We welcome feedback on this work.

Published by: SLACK Incorporated
6900 Grove Road
Thorofare, NJ 08086 USA
Telephone: 856-848-1000
Fax: 856-848-6091
www.slackbooks.com

Contact SLACK Incorporated for more information about other books in this field or about the availability of our books from distributors outside the United States.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

Contents

Introduction *4*

Chapter 1 Principles of Clinical Pathology and Decision Making 5

Chapter 2 Pathophysiology 9

Chapter 3 Pharmacology 14

Chapter 4 Immune System 23

Chapter 5 Oncology 29

Chapter 6 Cardiovascular and Hematological Systems 33

Chapter 7 Pulmonary System 43

Chapter 8 Gastrointestinal and Hepatic-Biliary Systems 53

Chapter 9 Renal and Urogenital Systems 59

Chapter 10 Endocrine and Metabolic Systems 66

Chapter 11 Eye, Ear, Nose, Throat, and Mouth Disorders 76

Chapter 12 Dermatological Conditions 82

Chapter 13 Neurological System 87

Chapter 14 Psychological Conditions 93

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

TEST BANK

Introduction

The questions in this Test Bank are provided as a resource for instructors to use when assessing their students' understanding of the pathophysiology, clinical presentation, diagnosis and therapeutic interventions for the injuries and systemic illnesses presented in *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. Questions are provided for Chapters 1 through 14 and are divided into 3 categories:

1. Multiple choice
2. Short answer/essay
3. Application/critical thinking

These questions could be used as an out-of-class assignment, as a quiz, or be incorporated into chapter tests. The answers for the multiple-choice questions are identified in bold text.

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

CHAPTER 1

Principles of Clinical Pathology and Decision Making

Multiple Choice

1. Regular medical check-ups and self-examination procedures are considered to be_____ prevention efforts.

   a. primary
   b. secondary
   c. tertiary
   d. unnecessary

2. Which of the following would be considered a symptom?

   I. nausea
   II. fever
   III. headache
   IV. sore throat

   a. I and II
   b. III and IV
   c. I, III, IV
   d. II

3. Early detection of illness is part of what stage of prevention?

   a. primary
   b. tertiary
   c. secondary
   d. quaternary

4. Reducing risk factors is part of what stage of prevention?

   a. primary
   b. tertiary
   c. secondary
   d. quaternary

5. Limiting an established disease and its effects are part of what stage of prevention?

   a. primary
   b. tertiary
   c. secondary
   d. quaternary

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

6. Which of the following is NOT part of the medical history?

a. chief complaint(s)
c. reflex testing
b. description of present illness
d. review of systems

7. "What makes your condition better or worse" is asked during which part of the medical history?

a. chief complaint
c. history of present illness
b. personal medical history
d. review of systems

8. Asking about a person's known medical conditions is done during which part of the medical history?

a. chief complaint
c. history of present illness
b. personal medical history
d. review of systems

9. Asking about specific symptoms to differentiate systemic illness from musculoskeletal injury is done during which part of the medical history?

a. chief complaint
c. history of present illness
b. personal medical history
d. review of systems

10. Symptoms such as recurrent "sweats" and "chills," pain at night, significant weight loss, and unusual fatigue suggest:

a. musculoskeletal injury
c. cardiovascular disease
b. serious systemic illness
d. gastrointestinal illness

11. Social factors collected during the medical history that may be related to development of a systemic illness include all of the following EXCEPT:

a. cigarette smoking
c. family history of heart disease
b. drinking alcoholic beverages
d. drinking caffeinated beverages

12. Referred pain is a term describing a symptom that:

a. is distant to the damaged tissue
c. "comes and goes"
b. stays in a specific location
d. is sudden and high intensity

13. Pain produced by tissue damage that is constant and relieved by medication is caused by which of the following mechanisms?

a. mechanical
c. chemical
b. perceptual
d. chronic

14. Physical stress on a tissue can cause pain by which of the following mechanisms?

a. mechanical
c. chemical
b. perceptual
d. chronic

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

15. Bones, muscles, and tendons produce what type of pain?

a. cutaneous
c. deep somatic
b. perceptual
d. visceral

16. Internal organs produce what type of pain?

a. cutaneous
c. deep somatic
b. perceptual
d. visceral

17. "Vital signs" include:

a. heart rate, respiration rate, blood pressure, and body temperature
b. heart rate, respiration rate, percussion, and body temperature
c. heart rate, cranial nerve tests, blood pressure, and body temperature
d. heart rate, respiration rate, blood pressure, and reflexes

18. The physical examination technique that involves striking the body to produce internal vibration is known as:

a. palpation
c. percussion
b. auscultation
d. abdominal rigidity

19. Tests during a neurological screening examination involve all of the following EXCEPT:

a. cranial nerves
c. deep tendon reflexes
b. motor function (myotomal)
d. coordination and balance

20. The process of using the signs, symptoms, and clinical examination to narrow down the possible conditions that a patient might be suffering from is referred to as:

a. etiology
c. pathomechanics
b. clinical presentation
d. differential diagnosis

21. The subjective findings reported by a patient is called:

a. sign
c. examination
b. symptom
d. diagnosis

22. The objective findings found by a clinician is called:

a. sign
c. examination
b. symptom
d. diagnosis

23. Primary prevention interventions include all of the following EXCEPT:

a. self examination
c. nutrition plans
b. exercise
d. education programs

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

24. The early detection or intervention of a disease state and to inhibit its proliferation is called:

    a. primary prevention
    b. secondary prevention
    c. tertiary prevention

25. Pain characteristics to be asked as part of a history include all of the following EXCEPT:

    a. where?
    b. when?
    c. quality?
    d. imaging?

26. Shooting, stabbing, burning pain is characteristic of:

    a. vascular pain
    b. neurogenic pain
    c. musculoskeletal pain
    d. psychoemotional pain

27. Components of an organ (ie, heart/lung) exam include ALL of the following EXCEPT:

    a. inspection
    b. percussion
    e. auscultation
    c. palpation
    d. diagnostic labs

Short Answer/Essay

1. Describe the difference between a sign and a symptom, and give 2 examples of each.
2. Explain the difference between diagnostic reasoning and clinical decision making.
3. Give 3 reasons why it is important for athletic trainers to be familiar with basic clinical pathology.
4. List and define the 3 stages of disease prevention. Give an example for each.
5. List 4 of the 5 components of the medical history, and give a brief description of each.
6. Name 3 "general illness" symptoms and 3 "key systemic symptoms," including the systems with which those symptoms are associated.
7. What are red flags? Give 2 examples. (3 points)

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

CHAPTER 2

Pathophysiology

Multiple Choice

1. Replacement of one normal cell type by another normal cell type in a body tissue is called:

   a. atrophy
   b. hypertrophy
   c. hyperplasia
   d. metaplasia

2. The production of abnormal cells that have a highly increased rate of division is called:

   a. atroplasia
   b. dysplasia
   c. hyperplasia
   d. metaplasia

3. What causes pain during acute inflammation?

   a. increased regional blood flow
   b. tissue damage and chemical mediators
   c. red blood cells in interstitial spaces
   d. erythema and ecchymosis

4. When muscle tissue is damaged, it is replaced by:

   a. muscle tissue
   b. collagen tissue
   c. chondral tissue
   d. endothelial tissue

5. Homeostasis can best be described as:

   a. maintenance of fluid, chemical, and energy values at exact levels
   b. dynamic regulation of fluid, chemical, and energy balance
   c. maintenance of blood glucose level
   d. cellular mechanisms of disease and their functional consequences

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

6. Under normal circumstances, values for chemical (such as blood test results) and functional systemic measures (such as vital signs):

   a. usually fluctuate within a range
   b. cannot be used to indicate state of health
   c. only exceed normal when disease exists
   d. is unrelated to age, gender, and genetics

7. "Pathophysiology" can best be described as:

   a. maintenance of fluid, chemical, and energy values at exact levels
   b. dynamic regulation of fluid, chemical, and energy balance
   c. maintenance of blood glucose level
   d. cellular mechanisms of disease and their functional consequences

8. The cell structure that controls cell division and protein synthesis is the:

   a. nucleus c. cytoplasm
   b. mitochondria d. lysosomes

9. The internal fluid environment of a cell is the:

   a. nucleus **c. cytoplasm**
   b. mitochondria d. lysosomes

10. The cell structure that breaks down and disposes of cell waste is the:

    a. nucleus c. cytoplasm
    b. mitochondria **d. lysosomes**

11. The cell structure that converts carbohydrate, protein, and fat to energy is the:

    a. nucleus c. cytoplasm
    b. mitochondria d. lysosomes

12. Once cell damage occurs, the cell:

    a. dies c. adapts
    b. dies or adapts d. mutates

13. Cells can be damaged by all of the following EXCEPT:

    a. physical trauma **c. social factors**
    b. deprivation of oxygen d. infection

14. A decrease in cell size as a result of decreased metabolic demands is called:

    a. atrophy c. hypertrophy
    b. hyperplasia d. metaplasia

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

15. An increase in cell number in a tissue, but without changes in rate of division, is called:

a. atrophy
c. hypertrophy
b. hyperplasia
d. metaplasia

16. The process of cell death from an inability to meet metabolic demands of the nucleus is called:

a. malignancy
c. dysplasia
b. necrosis
d. cancer

17. Which of the following types of cell adaptation is NEVER normal?

a. hypertrophy
c. metaplasia
b. dysplasia
d. hyperplasia

18. Which of the following is a general response to cell damage?

a. inflammation
c. infection
b. malignancy
d. metaplasia

19. Which order of events is correct for an acute inflammatory response following tissue damage?

I. cells release chemicals
II. vasodilation
III. tissue ischemia
IV. fluids and proteins move into interstitial space

a. I, II, III, IV
c. I, II, IV, III
b. I, III, IV, II
d. II, IV, I, III

20. Which of the following is NOT a potential complication of chronic inflammation?

a. increased fibrin and collagen production
b. prolonged leukocyte activity
c. increased tissue destruction
d. increased ecchymosis

21. Hyperpnea, tachycardia, fatigue, and increased body temperature are signs of what condition?

a. fever
b. chronic inflammation
b. dysplasia
d. cancer

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

22. Infection of a bone causes what condition?

a. fracture
b. osteomyelitis
c. osteochondritis
d. arthritis

23. Following a fracture in an adult, what is the minimal time before callus formation is complete?

a. 2 to 3 weeks
b. 8 to 12 weeks
c. 4 to 6 weeks
d. 12 to 16 weeks

24. Which of the following components replaces damaged connective tissue?

a. collagen
b. elastin
c. relaxin
d. expandin

25. Damaged muscle tissue is repaired with:

a. collagen
b. elastin
c. normal muscle tissue
d. is not repaired

26. Loss of large amounts of blood from the vascular system is called:

a. contusion
b. hemorrhage
c. epistaxis
d. hematoma

27. Signs of shock include:

a. pallor, hyperpnea, hypertension
b. tachycardia, hypertension, pallor
c. tachycardia, hypotension, pallor
d. erythema, hypotension, dyspnea

28. The shrinkage of cells OR cells becoming less active in response to decreased demand is called:

a. hypertrophy
b. atrophy
c. hyperplasia
d. metaplasia

29. The increase in the number of cells in tissue with NO change in rate of division/function is called:

a. hypertrophy
b. metaplasia
c. hyperplasia
d. atrophy

30. Types of cellular dysplasia include:

a. hyperplasia and necrosis
b. necrosis and metaplasia
c. necrosis and apoptosis
d. apoptosis and metaplasia

31. Stages of tissue healing include all of the following EXCEPT:

a. inflammatory phase
b. proliferative phase
c. revascularization phase
d. remodeling phase

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

32. Which of the following types of tissue takes the LONGEST to heal:

a. bone
c. muscle
b. nerve
d. tendon

33. The part of the bone that provides nutrition and covers the surface is called:

a. periosteum
c. osteoblasts
b. osteocytes
d. osteoclasts

34. Callus formation in bone allowing a patient to weight bear happens in what stage:

a. inflammatory phase
c. remodeling phase
b. proliferative phase

35. All of the following are muscle types EXCEPT:

a. skeletal
c. cardiac
b. collagen
d. smooth

Short Answer/Essay

1. Briefly explain the concept of homeostasis.
2. Outline the process of acute inflammation.
3. Compare and contrast acute and chronic inflammation.
4. Explain the mechanism and effects of fever.
5. Name any 2 tissue types, methods of cell damage in those tissue types, and how the tissue responds to that damage.

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

CHAPTER 3

Pharmacology

Multiple Choice

1. Which of the following substances appears to reduce the severity and duration of a cold (ie, runny nose and sore throat) if started within 24 hours of onset of these symptoms?

   a. vitamin C
   c. zinc
   b. vitamin E
   d. iron

2. Which of the following statements best describes the generic name for a drug?

   a. refers to the chemical structure
   c. derived from the chemical name
   b. proprietary
   d. trade name

3. Which of the following medications is administered enterally?

   a. inhalers
   c. tablets and capsules
   b. topical ointments
   d. injections

4. Which of the following classes of antihistamines is associated with the greatest amount of drowsiness?

   a. first generation
   c. third generation
   b. second generation
   d. fourth generation

5. Which of the following medications works as a decongestant?

   a. Allegra
   c. diphenhydramine
   b. pseudoephedrine
   d. Claritin

6. Which is the study of how the body absorbs, distributes, metabolizes, and eliminates drugs?

   a. pharmacodynamics
   c. bioavailability
   b. pharmacokinetics
   d. pharmacology

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank

7. Which of the following medications would be the best choice for treating an athlete complaining of a runny nose and itchy, watery eyes?

a. pseudoephedrine
b. Claritin
c. diphenhydramine
d. Allegra D

8. Which of the following medications has the greatest potency?

a. ketoprofen (12.5 mg/tablet, 1 tablet every 4 to 6 hours)
b. ibuprofen (200 mg/tablet, 2 tablets every 4 hours)
c. acetaminophen (500 mg/tablet, 2 tablets every 4 to 6 hours)
d. aspirin (325 mg/tablet, 2 tablets every 4 hours)

9. Which of the following drugs would most likely be taken by someone wanting to improve his or her performance during brief, high intensity exercise?

a. hGH
b. creatine
c. epoetin alfa
d. androstenedione

10. Which of the following classifications of controlled substances includes drugs with the least potential for addiction and abuse?

a. Schedule I
b. Schedule II
c. Schedule III
d. Schedule IV

11. Which of the following effects are associated with the use of hGH?

I. increased body fat
III. increased energy levels
II. decreased body fat
IV. decreased immune system function

a. I and III only
b. II and III only
c. II, III and IV only
d. I and IV only

12. A drug's _____ refers to the amount of time needed to reduce the drug's concentration in the body to 50%?

a. bioavailability
b. potency
c. dosage
d. half-life

13. Which of the following performance-enhancing drugs has the ability to alter your source of fuel from carbohydrate to fat?

a. erythropoietin
b. androgenic-anabolic steroids
c. corticosteroids
d. human growth hormone

14. Which of the following performance-enhancing substances is associated with an increased production of estrogen?

a. creatine
b. growth hormone
c. erythropoietin
d. androstenedione

Bhojani RA, O'Connor DP, Fincher AL. *Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, Fourth Edition*. © 2022 SLACK Incorporated.

Clinical Pathology for Athletic Trainers - Recognizing Systemic Disease 4th edition Bhojani Test Bank