

## **Sample Test**

Practice tests provide examples of the type of items that you can expect to find on an examination; they are not intended to be study guides or to replace other forms of test preparation.

- 1. Once the swallow has gone from voluntary to involuntary control:
  - The remainder of the swallow is primarily controlled reflexively
  - B. The risk of aspiration is diminished
  - Cricopharyngeal tone increases until the bolus passes through the UES
  - D. The hyoid and thyrohyoid will approximate
- 2. The hyoglossus is primarily active during which function of the swallow?
  - A. Lip closure
  - B. Tongue base retraction
  - C. Pharyngeal constriction
  - D. UES opening
- 3. A patient 2 weeks post-extubation presents with signs of penetration during the swallow. Which of the following is a likely key impairment?
  - A. Weakness of hyolaryngeal excursion muscles
  - B. Stiffness of the upper esophageal sphincter
  - C. Weakness of velopharyngeal musculature
  - D. Stiffness of hyolaryngeal protractors
- 4. NMES is indicated for:
  - A. Decreasing pain
  - B. Muscle strengthening
  - C. Wound healing
  - D. Peripheral nerve lesions
- 5. Decreased UES opening is noted on an MBS of a patient. Which of the following interventions may promote UES opening?
  - A. Shaker exercise
  - B. Head turn
  - C. Chin tuck
  - D. Double swallow
- 6. Which of the following best characterizes ALS?
  - A. Primarily upper motor neuron involvement
  - B. Primarily lower motor neuron involvement
  - C. Mixed upper and lower motor neuron involvement
  - D. Primarily peripheral nerve involvement
- 7. Which of the following physiological rationales is most responsible for promoting muscle strength and reverse atrophy during NMES therapy?
  - A. Promote decreased of sensory input and feedback to the patient
  - B. Promote reduction of adipose tissue in the anterior neck musculature
  - C. Promote Type I fiber recruitment and produce an asynchronous contraction
  - Promote Type II fiber recruitment and produce a synchronous contraction

Answer Key

1A, 2B, 3A, 4B, 5A, 6A, 7D, 8B, 9B, 10C, 11B, 12D, 13D, 14B, 15D

- 8. All of the following are components of evidence-based practice, except for:
  - A. Clinical expertise
  - B. Personal opinion or bias
  - C.Patient values and preferences
  - D.Best research evidence
- 9. The "biting" sensation caused by poor electrode contact can be explained by:
  - A. Increasing current amplitude
  - B. Increasing current density
  - C.Increasing voltage
  - D. Increasing current frequency
- 10. When using electrotherapy, resistance is measured in:
  - A. MilliVolts (mV)
  - B. Milliamperes (mA)
  - C. Ohms  $(\Omega)$
  - D. Hertz (Hz)
- 11. According to I=V/R, when resistance increases and voltage stays the same, intensity will:
  - A. Increase
  - B. Decrease
  - C. Stay the same
  - D. Match the resistance
- 12. Which anatomical electrode placement is indicated in a patient presenting with a primary impairment of tongue weakness?
  - A. Between hyoid bone and mandible
  - B. Between TMJ and corner of the mouth
  - C.Over the thyrohyoid musculature
  - D.Over the anterior belly of the digastrics
- 13. Which of the following electrode placements is most likely to provide optimal recruitment of the orbicularis oris muscle?
  - A. Placement over the ocular branch of the facial nerve
  - B. Placement over the mandibular branch of the facial nerve
  - C. Placement over the cephalic branch of the facial nerve
  - D.Placement over the buccal branch of the facial nerve
- 14. The clinician is delivering NMES for the treatment of dysphagia using 25MA of current. All of the following are likely to responses except:
  - A. The patient will experience a maximum level contraction.
  - B. The patient will likely experience a submaximal contraction.
  - C.The patient will not be able to superimpose a functional swallow
  - D. The patient will report discomfort
- 15. Based on FDA clearance, which of the following is considered an off-label application for NMES for dysphagia?
  - A. An application to muscles required for pharyngeal contraction
  - B. An application to muscles required for hyolaryngeal excursion
  - C.An application to stimulate tongue base retraction
  - D. An application to elicit stronger vocal quality