

FSMTB MBLE_x

Massage & Bodywork Licensing Examination

Questions And Answers PDF Format:

For More Information – Visit link below:

<https://www.certsgrade.com/>

Version = Product



Latest Version: 6.0

Question: 1

What is the primary benefit of massage for the circulatory system?

- A. Massage can increase circulation.
- B. Massage can dislodge blood clots.
- C. Massage has no impact on circulation.
- D. Massage can inhibit circulation.

Answer: A

Explanation:

The increase of circulation is massage's primary benefit to the circulatory system. This is accomplished in two ways. Mechanically, massage strokes can mimic healthy blood flow patterns, stimulating the movement of blood through the arterial and venous systems. Chemically, massage also stimulates the release of vasodilators.

Massage does not inhibit circulation. While massage can dislodge blood clots, this is not a benefit. Therapists should take great care to avoid dislodging blood clots. One way to do this is to avoid massaging the legs of clients who are at risk of developing clots.

Question: 2

A new client comes to the clinic with reports of pain in the mid-portion of the calf and also in the arch of the foot. He states the pain has started gradually over the course of several weeks. Based on the information given, what is the most likely source of this client's pain?

- A. A trigger point in the gastrocnemius
- B. A trigger point in the soleus
- C. A trigger point in the abductor hallucis
- D. A trigger point in the peroneus longus

Answer: A

Explanation:

The gastrocnemius is located on the posterior aspect of the calf. It is a large muscle in which trigger points commonly occur. Trigger points can create pain in areas far away from the muscle/trigger point itself. Trigger points in the gastrocnemius refer pain to the mid-calf and the arch of the foot.

A trigger point in the soleus would produce pain in the mid-portion and inferior portions of the calf, but not in the arch of the foot. In the peroneus longus, a trigger point would produce pain along the lateral calf, while a trigger point in the abductor hallucis would produce pain along the first metatarsal.

Question: 3

A regular client comes in for their monthly massage. When they arrive, they say "I'm so excited for this. I have flu, and I've had a fever for days. I'm so glad I finally get to have a massage and relax. I know this is going to help!" How should the therapist proceed?

- A. Proceed with the massage using only long, gliding strokes.
- B. Proceed with the massage.
- C. Reschedule the session.
- D. Proceed with the massage but use only deep pressure instead of long gliding strokes.

Answer: C

Explanation:

A fever is a general contraindication. Massage increases circulation, and may also temporarily increase inflammation. Because a fever is a form of systemic inflammation, massage will likely worsen the client's condition. In addition to this, working on a client with a contagious illness poses a risk to the massage therapist.

Any type of massage may cause a fever to worsen; avoiding certain types of massage techniques will not change this.

Question: 4

A spinal cord injury at what level would still allow a person to continue breathing on their own?

- A. Above C3
- B. C2-C3
- C. Below C5
- D. C2

Answer: C

Explanation:

The diaphragm is the primary muscle responsible for breathing. It is innervated by the phrenic nerve which originates from C3-C5. Injury at or above this level would result in severe difficulty or complete inability to breathe on one's own. Think, "Stayin' alive, C3, 4, 5!"

Any injury to the level C5 or above would result in severe difficulty or inability to breathe since the signal for the phrenic nerve must travel through C1-C5 to carry the signal to the diaphragm. Spinal injuries at or inferior to the level of C6 do not necessarily inhibit breathing.

Question: 5

You are treating a patient who experienced a CVA one year ago. Her humerus is not fully articulating at the shoulder complex, noting a step off deformity at the joint. What type of soft tissue condition does the individual have?

- A. Dislocation
- B. Subluxation
- C. Spondylosis
- D. Sprain

Answer: B

Explanation:

Subluxation is the medical term used to describe this patient's condition. Due to impaired muscle tone after a CVA (stroke), many individuals with upper extremity involvement develop shoulder subluxation. A subluxation is any deviation from the normal relationship in which the articular cartilage is touching any portion of its mating cartilage. Massage can help to relieve muscle spasm or muscle pain. However, the client should get clearance from her physician prior to massage, and the therapist should work under the supervision of the doctor.

A sprain is an injury to the ligaments. Spondylosis is a degenerative joint disorder. Dislocation occurs when a bone is displaced from its normal location.

Question: 6

A massage therapist is interested in receiving a specialization for sports specific massage. This massage therapist would need to pursue which type of credentialing?

- A. Licensing
- B. Exemption
- C. Professional certification
- D. Informed consent

Answer: C

Explanation:

Professional certification is voluntary and not required in order to practice. It is self-regulated by the profession and does not include governmental oversight. Massage therapists are recognized for advanced knowledge and skills.

Most states require massage therapists to be licensed in order to practice. This is intended to protect the health, safety, and welfare of the public. Licensing requires a state or provincial board of examiners and requires specific educational background or examination. It protects the usage of the title of massage therapist.

Exemption means that the professional is not required to comply with existing regulation. It excuses practitioners who meet specific educational requirements or experience from meeting current regulation requirements.

Informed consent is information used to educate the client regarding their choices and agreement for care. The massage therapist must receive informed consent from the client prior to massage therapy intervention.

Question: 7

Which of the following is not a smooth or cardiac muscle?

- A. Heart
- B. Bladder
- C. Intestine
- D. Rectus femoris

Answer: D

Explanation:

The rectus femoris is a skeletal muscle.

The heart is a cardiac muscle.

Smooth muscles are involuntary and include the blood vessels, stomach, intestine, and bladder.

Question: 8

Fill in the blank: Massage has a known impact on T cell activity, improving immune function and benefiting the client's _____.

- A. lymphatic system
- B. integumentary system
- C. respiratory system
- D. nervous system

Answer: A

Explanation:

Massage has a known impact on T cell activity, improving immune function and benefiting the client's lymphatic system. Other benefits of massage to the lymphatic system include alleviating the symptoms of lymphedema, stimulating lymph circulation, and encouraging the body to process and remove toxins.

The respiratory system is responsible for breathing. The nervous system receives stimuli and controls the body's voluntary and involuntary responses. The integumentary system includes the skin.

Question: 9

HIPAA is an act that includes legislation to protect the privacy and security of client information and must be followed by massage therapists. What does this stand for?

- A. Health Insurance Privacy and Autonomy Act

- B. Health Information Privacy and Accuracy Act
- C. Health Information Protection and Accountability Act
- D. Health Insurance Portability and Accountability Act

Answer: D

Explanation:

The Health Insurance Portability and Accountability Act (HIPAA) is in effect to protect the security and privacy of patients and in order to set standards for maintaining health information formatting, reducing fraud, and promoting ease of transport of health insurance information and insurance coverage. All health plans and health care providers must follow the laws outlined in HIPAA. This includes massage therapists.

Question: 10

Which of the following is true of the great saphenous vein?

- A. It naturally becomes varicose with age.
- B. It ascends medially from the foot to the thigh, where it drains into the femoral vein.
- C. It descends medially from the femoral artery to the foot.
- D. It drains into the aorta.

Answer: B

Explanation:

The great saphenous vein ascends medially from the foot to the thigh, where it drains into the femoral vein. It is one of the major veins of the lower extremity.

Veins do not connect directly with arteries; instead, they bring blood all the way back to the heart, where it is oxygenated before traveling back out through the arterial system. Therefore, it would not connect with either the femoral artery or the aorta, which is also arterial. While the great saphenous vein can develop into a varicose vein, this is not a symptom of pathology, not a natural process.

Question: 11

Where does the sciatic nerve arise?

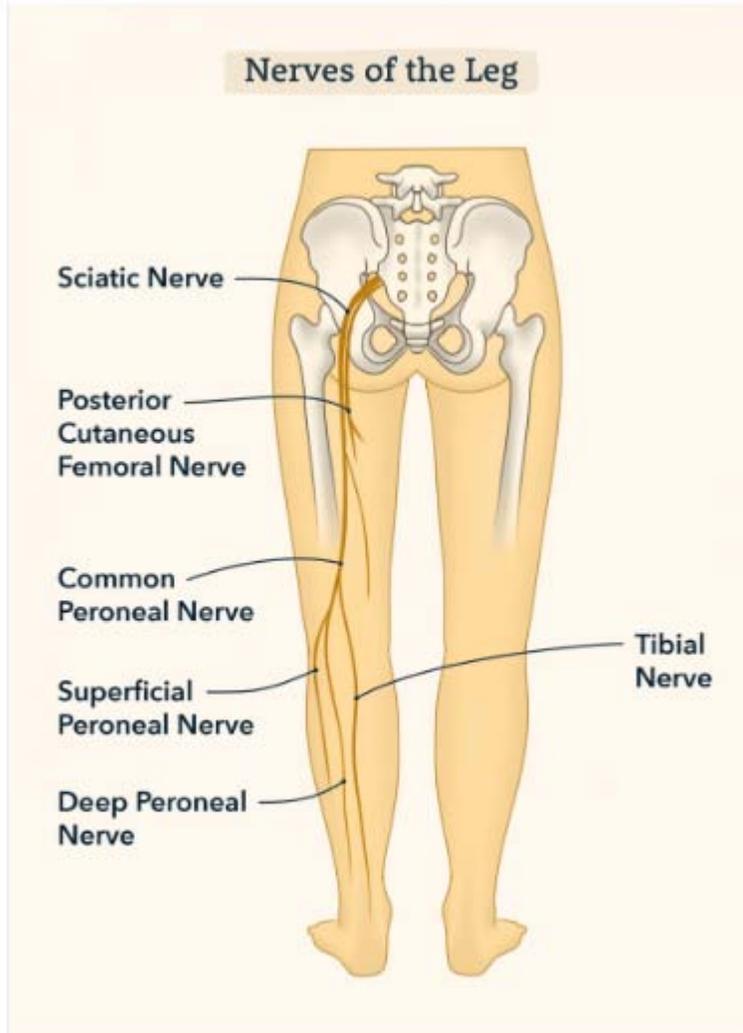
- A. The ventral surface of the brain
- B. L3-L4
- C. L4-S3
- D. C5-C8

Answer: C

Explanation:

The sciatic nerve arises from the nerves which exit the spine from L4-S3.

The femoral nerve arises from the nerves exiting the spine from L3-L4. The cranial nerves originate from the ventral surface of the brain. The axillary nerve arises from the nerves exiting the spine from C6-C8.



Question: 12

Which diarthrotic joint has convex on concave articulation?

- Hinge joint
- Saddle joint
- Pivot joint
- Ball-and-socket joint

Answer:

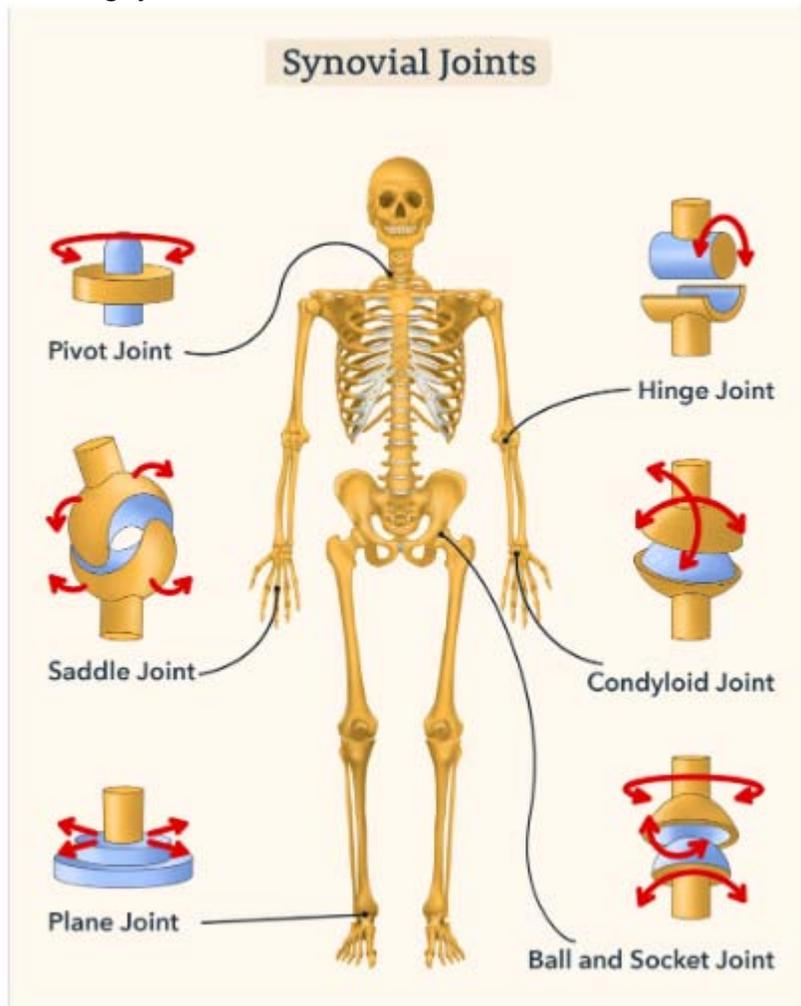
Explanation:

In saddle joints, each bone has both convex and concave surfaces, resembling a saddle. This configuration allows for flexion, extension, abduction, adduction, and minimal rotation. The joint between the wrist and the metacarpal bone of the thumb is an example of this.

In ball-and-socket joints, one bone ends in a spherical head and the other has a round socket. This formation allows free movement in many directions around a central point. The glenohumeral joint in the shoulder is a ball-and-socket joint.

In a pivot joint, one component is shaped like a ring and the other has a rounded end of bone that fits into that ring. This allows the bones to rotate. The atlanto-axial joint, between the first and second vertebrae, is an example of this.

In a hinge joint, the cylindrical end of one bone fits into the trough-shaped surface of another. This structure acts like a door hinge, allowing for flexion and extension in just one plane. Both the elbow and knee are hinge joints.



Question: 11

Which of the following principles that guide professional ethical behavior describes a client's right to objective truth?

- A. Veracity
- B. Respect
- C. Beneficence
- D. Proportionality

Answer: A

Explanation:

Every massage therapist must follow eight principles that guide ethical professional behavior:

1. Respect: Esteem and regard for clients, colleagues, and oneself.
2. Client autonomy and self-determination: The client's freedom to decide for themselves, and their right to have sufficient information to give informed consent.
3. Veracity: The right to objective truth.
4. Proportionality: The principle that the benefit must outweigh the burden of treatment.
5. Nonmaleficence: The principle that massage therapists will do no harm and prevent harm from happening.
6. Beneficence: The principle that treatment should contribute to the client's well-being.
7. Confidentiality: Respect for the privacy of information.
8. Justice: Equality.

Question: 13

What is the function of the sartorius muscle when it acts as an isometric stabilizer?

- A. Stabilizes the knee and ankle joints
- B. Stabilizes the lumbar spine
- C. Stabilizes the shoulder complex
- D. Stabilizes the knee and hip joints

Answer: D

Explanation:

The sartorius muscle is a long muscle of the lower extremity that originates at the ASIS and inserts at the proximal anteromedial tibia at the pes anserinus tendon. Its isometric action is to stabilize the knee and hip joints. Its concentric actions are flexion, lateral rotation, and abduction of the thigh at the hip joint; flexion and medial rotation of the leg at the knee joint (the knee must be semiflexed for medial rotation to occur); and anterior tilt of the pelvis at the hip joint. Eccentrically it restrains extension, adduction, and medial rotation of the thigh, allows for extension and lateral extension of the leg, and allows for posterior tilt of the pelvis.

Because the sartorius does not connect with the ankle, the lumbar spine, or any part of the shoulder, the remaining answers are incorrect.

Question: 14

What cranial nerve affects the function of visceral organs?

- A. Trigeminal nerve
- B. Vagus nerve
- C. Facial nerve
- D. Trochlear nerve

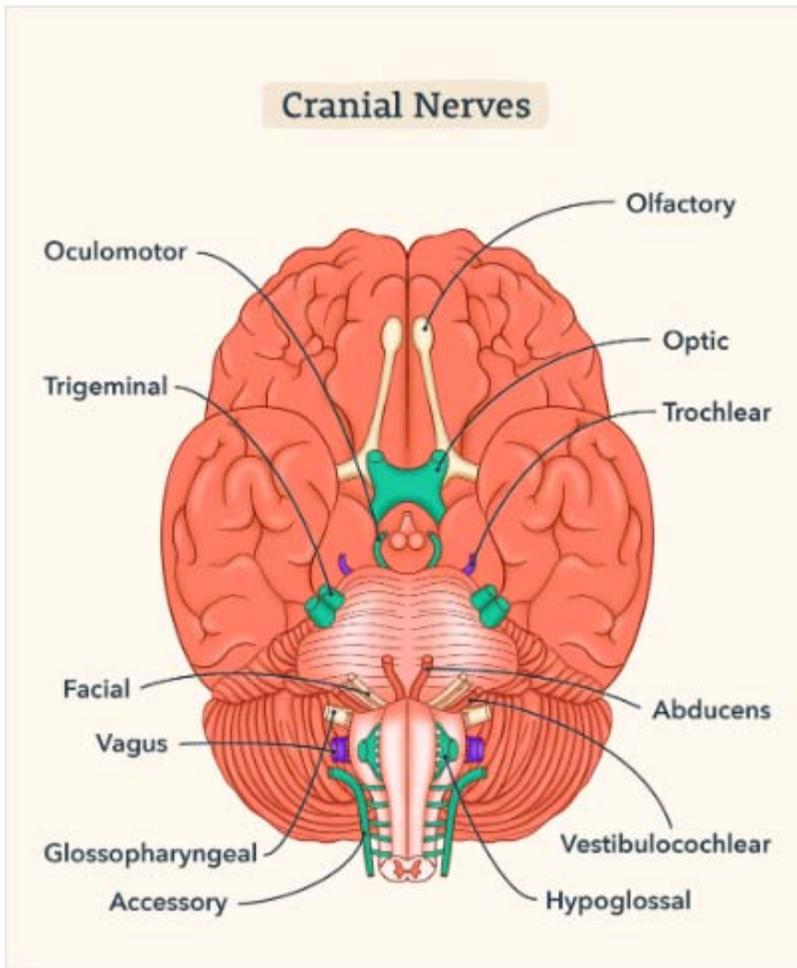
Answer: B

Explanation:

The vagus nerves contain sensory neurons for the pharynx, larynx, trachea, heart, carotid body, lungs, bronchi, esophagus, stomach, small intestine, and gallbladder. Their motor neurons carry impulses to the pharyngeal and laryngeal muscles, and the abdominal viscera. They control heart rate and other visceral activities.

The cranial nerves include:

- I. The olfactory nerves, which transmit taste and smell information to the brain.
- II. The optic nerves, which transmit visual information to the brain.
- III. The oculomotor nerves, which transmit information about eye movement.
- IV. The trochlear nerves, which innervate the muscles of the eyeball.
- V. The trigeminal nerves, which transmit information about sensation in the head, face, and facial skin, and include motor neurons for mastication.
- VI. The abducens nerves, which include both sensory and motor neurons related to eye movement.
- VII. The facial nerves, which have sensory neurons for taste and motor neurons for facial expression, tear production, and salivation.
- VIII. The vestibulocochlear nerves, which receive information about hearing and equilibrium.
- IX. The glossopharyngeal nerves, which relate to taste, saliva production, swallowing, and the gag reflex.
- X. The vagus nerves. These nerves contain sensory neurons for the pharynx, larynx, trachea, heart, carotid body, lungs, bronchi, esophagus, stomach, small intestine, and gallbladder. Their motor neurons carry impulses to the pharyngeal and laryngeal muscles and the abdominal viscera. They control heart rate and other visceral activities.
- XI. The accessory nerves mainly contain motor neurons for speaking, turning the head, and moving the shoulders.
- XII. The hypoglossal nerves contain mostly motor neurons, which innervate the tongue and throat.



Question: 15

Which of the following is not a cranial nerve?

- A. Sciatic
- B. Facial
- C. Optic
- D. Vagus

Answer: A

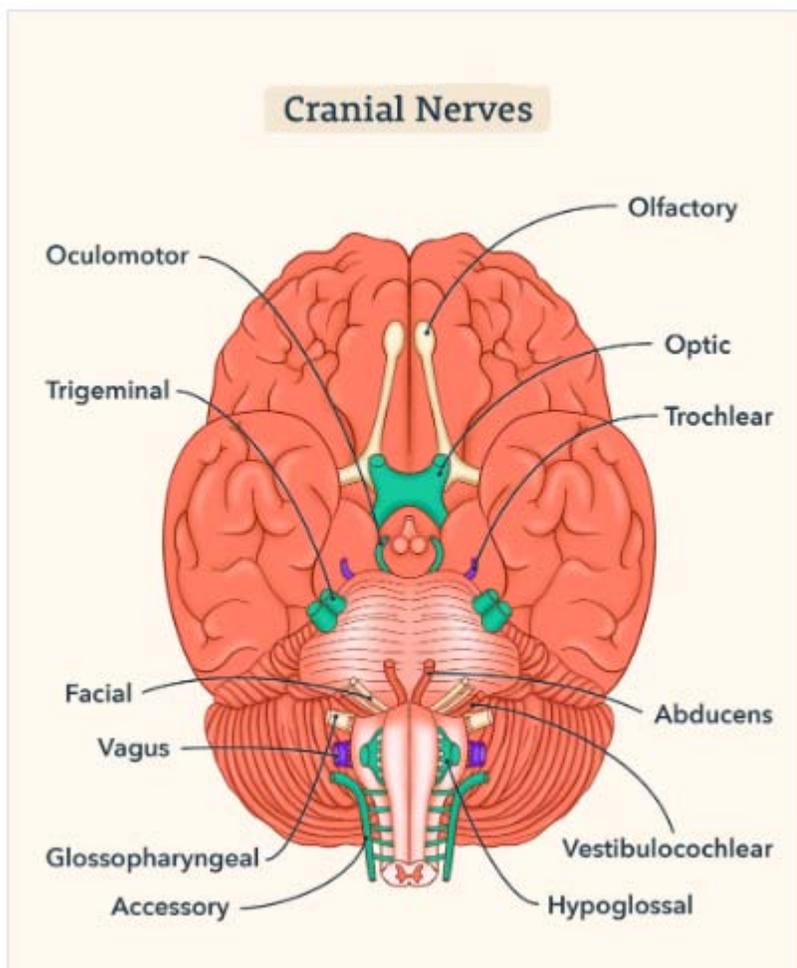
Explanation:

The sciatic nerve is a lumbosacral nerve, which means it arises from nerves that exit the lumbar spine and the sacrum. It innervates the posterior thigh, leg, and sole of the foot.

The cranial nerves include:

- I. The olfactory nerves, which transmit taste and smell information to the brain.
- II. The optic nerves, which transmit visual information to the brain.

- III. The oculomotor nerves, which transmit information about eye movement.
- IV. The trochlear nerves, which innervate the muscles of the eyeball.
- V. The trigeminal nerves, which transmit information about sensation in the head, face, and facial skin, and include motor neurons for mastication.
- VI. The abducens nerves, which include both sensory and motor neurons related to eye movement.
- VII. The facial nerves, which have sensory neurons for taste and motor neurons for facial expression, tear production, and salivation.
- VIII. The vestibulocochlear nerves, which receive information about hearing and equilibrium.
- IX. The glossopharyngeal nerves, which relate to taste, saliva production, swallowing, and the gag reflex.
- X. The vagus nerves. These nerves contain sensory neurons for the pharynx, larynx, trachea, heart, carotid body, lungs, bronchi, esophagus, stomach, small intestine, and gallbladder. Their motor neurons carry impulses to the pharyngeal and laryngeal muscles and the abdominal viscera. They control heart rate and other visceral activities.
- XI. The accessory nerves mainly contain motor neurons for speaking, turning the head, and moving the shoulders.
- XII. The hypoglossal nerves contain mostly motor neurons, which innervate the tongue and throat.



For More Information – **Visit link below:**
<https://www.certsgrade.com/>

PRODUCT FEATURES

-  **100% Money Back Guarantee**
-  **90 Days Free updates**
-  **Special Discounts on Bulk Orders**
-  **Guaranteed Success**
-  **50,000 Satisfied Customers**
-  **100% Secure Shopping**
-  **Privacy Policy**
-  **Refund Policy**

16 USD Discount Coupon Code: **NB4XKTMZ**



Visit us at: <https://www.certsgrade.com/pdf/mblex>