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Question: 1

While lifting weights, an athlete experiences lower back pain on one side of the body. What tests should the athletic trainer perform to assess for lumbar disc herniation?

- A. X-ray of the spine
- B. Straight leg raise (SLR) test
- C. MRI
- D. Heel-toe walk
- E. Electro stimulation

Answer: B,D

Explanation:

The athletic trainer is not qualified to do many medical tests such as x-ray or MRI. If needed, these types of tests will most likely be done by a licensed physician or medical professional. Though electro stimulation as a treatment is within the scope of practice for an athletic trainer, it would not be performed as a test. The athletic trainer can do a couple of simple tests during a physical examination to try to assess the lower back pain. The first is straight leg raise (SLR) test. The individual should lie flat on his back and try to lift the leg straight up. The knee should remain straight. If pain is felt down the leg and below the knee, a herniated disc is very likely. A second test to assess weakness is the heel-toe walk. Inability to do this type of walk may signal nerve compression in the spine, caused by a herniated disc. A referral to a physician is needed in this case. Treatment typically involves rest and anti-inflammatory medication for pain relief. Sometimes physical therapy or steroid injections may be recommended.

Question: 2

A 60-year-old woman is experiencing mild pain and tenderness in her wrist, but is able to move it through full range of motion. She reports no obvious trauma to the area. She has a history of diabetes, controlled with diet and medication. She has fractured her wrist twice in the past 10 years. What are the potential diagnoses based on this clinical evaluation?

- A. Osteoarthritis
- B. Carpal tunnel syndrome
- C. Wrist dislocation
- D. Wrist fracture
- E. Tendonitis

Answer: A, B, E

Explanation:

There are many possible causes of wrist pain. It is unlikely to be due to a fracture or dislocation because this would result in a higher level of pain and inability to move through full range of motion. Osteoarthritis is a possibility, given her age and history of wrist injuries. Tendonitis and carpal tunnel syndrome are also possible. These types of injuries are typically caused by repetitive motion that uses the wrist for a long period of time without a break such as playing tennis, using a computer, driving cross country, or playing a string instrument. Additional information should be obtained about recent activities. Treatment can vary based on actual diagnosis but involves pain relievers such as acetaminophen or ibuprofen.

Question: 3

What is the difference between a sprain and a strain?

- A. There is no real difference between the terms.
- B. A strain hurts more than a sprain.
- C. A strain is pain in the muscle, and a sprain is overstretched or torn ligaments.
- D. A sprain is common in areas like the ankle, knee, or wrist, whereas a strain is common in the back, legs, or neck.
- E. A strain will not show any bruising.

Answer: C, D

Explanation:

A sprain and a strain are similar injuries, but there are some differences. They are similar because both injuries cause pain and may cause some swelling and bruising. A strain is more serious than a sprain. A sprain can occur when the ligaments have been overstretched or torn, causing a mild to severe sprain. A sprain will typically cause pain immediately and the individual may not be able to put any pressure on the injured area at all. Sprains will usually involve wrists, knees or ankles. A strain is pain in a muscle that has been stretched too far. The most common areas for strains are the back, legs, or neck. Strains are more likely to occur if an individual does not properly warm up before engaging in certain activities.

Question: 4

Which of the following statements is true regarding the initial treatment of a strain or sprain?

- A. An individual with a strain or sprain should go immediately to the emergency room or call 911.
- B. An individual with a sprain should wear a splint, cast, or elastic bandages to reduce swelling.
- C. An individual with a sprain or a strain should go to a physician for further evaluation.
- D. An individual with a strain or sprain should try to walk it off and reassess it in a couple hours.
- E. An individual with a strain or sprain should take pain medication such as acetaminophen or ibuprofen.

Answer: B, C, E

Explanation:

If an individual might have a strain or a sprain, he or she should be advised to refrain from using the affected part of the body. A physician can better assess the injury and an x-ray may be required. Referral to an emergency room or a call to emergency medical services is not usually necessary, although some patients may choose to be seen in an urgent care facility. A sprained area will most likely require some type of support, such as a splint, cast, or elastic bandage. An area with a strain will require rest. Both types of injuries will benefit from some type of pain relief medication, such as acetaminophen or ibuprofen. A strain will usually heal within a week, whereas a sprain may take as long as four weeks to heal.

Question: 5

During a high school varsity football practice, the temperature is 95°F. One of the linebackers is complaining of nausea, lightheadedness, and fatigue. He has a headache and vomited approximately 30 minutes earlier. What should be done to initiate treatment?

- A. Have him go inside where there is air conditioning.
- B. Provide a pain reliever for the headache.
- C. Provide 4 ounces of water or sports drink every 15 minutes.
- D. Use a fan to help cool the skin, and apply cool compresses on pulse points.
- E. Provide salt tablets to help replace lost electrolytes.

Answer: A, C, D

Explanation:

The student athlete is showing signs of heat exhaustion. Some of the early symptoms are dizziness, lightheadedness, extreme sweating, nausea, muscle cramps, weakness, and fatigue. Late symptoms include headache, nausea and vomiting, and dilated pupils. As heat exhaustion progresses, it can lead to irrational behavior and loss of consciousness. Immediate treatment consists of moving the individual to a cooler place and elevating feet. A fan can be used to help lower body temperature and cool cloths can be placed on the skin at various pulse points such as the neck armpits, or groin. The individual should begin to slowly rehydrate with cool water or sports beverages with approximately 4 ounces every 15 minutes. Pain relievers should not be administered. Salt tablets should not be given because these may cause harm. If the individual does not show signs of recovery or begins to show signs of shock or seizure, emergency care should be sought.

Question: 6

Which of the following is NOT an appropriate step to take when initiating treatment for cold injury to the feet?

- A. Remove any wet clothing and have the individual elevate the feet to reduce swelling.
- B. Have the individual place the feet near a space heater to help gradually thaw the feet.
- C. Avoid rubbing the feet because this may damage the tissue.

- D. Put cotton between the toes to avoid friction.
- E. Call for emergency medical services immediately if there is evidence of deep cold injury.

Answer: B

Explanation:

Cold injury is most likely to occur in the hands, feet nose, and ears. There are varying degrees of cold injury, with frostbite being less severe. Deep cold injury is less common in athletics. Cold injury can cause extensive tissue damage if not treated appropriately. The most important point to remember is to prevent gradual thawing of the area or to warm the area if there is a risk of the area refreezing. Rewarming of a deep cold injury should occur quickly (within 15-30 minutes) using a warm water bath. The individual should not be placed close to a heat source, such as a space heater. Wet clothing should be removed. In the case of cold injury to the feet, cotton should be placed between the toes to prevent friction and the area should not be massaged because this may cause tissue damage. Individuals with frostbite or deep cold injury will often require hospitalization for a couple days to ensure the area is healing and there is no infection.

Question: 7

During soccer practice, a player falls against the goal post and has a large laceration on his arm that is bleeding. Which of the following is the most appropriate immediate treatment of the injury?

- A. Either you or the injured player apply a clean bandage and press the wound while someone else retrieves the first-aid kit and gloves.
- B. Apply a tourniquet above the laceration.
- C. Have the goalie apply pressure to the wound using a clean cloth while retrieving a pair of gloves.
- D. Apply pressure on the femoral artery.
- E. Apply a splint to the arm to help control the bleeding.

Answer: A

Explanation:

At any sign of blood, universal should be the first step in treatment. Universal precautions will help to stop the spread of blood-borne infection. If the player is conscious and able to apply pressure to the wound on his own, he should be given a sterile or clean bandage and begin to apply pressure while the athletic trainer puts on gloves. If he is not able to do this on his own and the athletic trainer is not able to put on gloves right away, the trainer must make sure to use enough bandages to prevent blood from saturating the bandage and to prevent direct contact with blood. A tourniquet is a last-ditch effort to stop bleeding and is not routinely indicated. Pressure on the femoral artery will not help stop the bleeding for an arm injury because the femoral artery is located in the groin area. A splint is required in the case of a broken bone to help immobilize the area as well as to help stop the bleeding.



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