HUMAN FUNCTIONS TEST 1 PRACTICE (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.

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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!

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Questions

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1. What is the function of the buccinator muscle?

A. Elevates the jaw

B. Closes the eyelids

C. Contracts the cheeks to narrow the mouth

D. Depresses the lips

2. Which muscle is a primary mover of jaw closure during chewing?

A. Masseter

B. Temporalis muscle

C. Medial pterygoid

D. Lateral pterygoid

3. Shoulder abduction occurs in which plane of motion?

A. Sagittal

B. Transverse

C. Frontal

D. Oblique

4. Which of the following lists contains the muscles that contribute to wrist extension?

A. Abductor pollicis longus and extensor pollicis brevis

B. Extensor carpi ulnaris, extensor digitorum, extensor carpi radialis longus and extensor carpi radialis brevis

C. Flexor carpi radialis, flexor digitorum profundus

D. Flexor carpi ulnaris and extensor carpi ulnaris

5. Which type of exercise is most appropriate for a client with weak triceps?

A. Open chain

B. Isometric

C. Closed chain

D. Plyometric

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6. Damage to the radial nerve typically results in which functional loss?

A. Median nerve: loss of forearm and thumb opposition

B. Ulnar nerve: loss of thumb adduction

C. Carpal tunnel syndrome

D. Radial nerve: loss of elbow, wrist, finger and thumb extension

7. Which statements describe the primary movement and insertion of the biceps brachii?

A. Insertion at radial tuberosity; Flex elbow and flex the shoulder

B. Flex elbow and flex the shoulder; Insertion at the radial tuberosity

C. Extend the elbow; Insertion at radial tuberosity

D. Pronation of forearm; Insertion at coronoid process

8. The extensor hood is another name for which structure?

A. Dorsal interosseous membrane

B. Flexor tendon sheath

C. Extensor expansion ligament

D. Ulnar collateral ligament

9. Which bone forms the floor of the anatomical snuffbox?

A. Scaphoid

B. Capitate

C. Lunate

D. Trapezium

10. Which plane is primarily associated with abduction and adduction movements?

A. Sagittal plane

B. None

C. Coronal/Frontal plane

D. Transverse plane

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Answers

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

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Explanations

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1. What is the function of the buccinator muscle?

A. Elevates the jaw

B. Closes the eyelids

C. Contracts the cheeks to narrow the mouth

D. Depresses the lips

This item tests the function of the buccinator, the muscle that forms the cheek and controls how the cheek is pressed toward the teeth. When it contracts, the buccinator tenses the cheek and presses it against the teeth, which narrows the mouth opening and helps keep food between the teeth during chewing while also aiding in blowing or whistling. That's why contracting the cheeks to narrow the mouth best fits the buccinator's role. It's not involved in elevating the jaw, closing the eyelids, or depressing the lips—those actions come from other muscles.

2. Which muscle is a primary mover of jaw closure during chewing?

A. Masseter

B. Temporalis muscle

C. Medial pterygoid

D. Lateral pterygoid

Jaw closure during chewing relies on the muscles that lift the mandible. The masseter is the primary mover here, delivering the strongest closing action and most of the bite force by pulling the lower jaw upward from the cheekbone to meet the upper teeth. The temporalis also helps close the jaw and can retract the mandible, adding to biting efficiency, but it isn't the main source of closing power. The medial pterygoid assists in elevating the jaw and stabilizing the bite, working together with the masseter, while the lateral pterygoid mainly opens the jaw and moves it forward. So, the masseter is the key muscle responsible for closing the jaw during chewing.

3. Shoulder abduction occurs in which plane of motion?

A. Sagittal

B. Transverse

C. Frontal

D. Oblique

Shoulder abduction is the movement of lifting the arm away from the midline of the body, which happens in the frontal plane (also called the coronal plane). In this plane, the limb moves laterally, and abduction is paired with adduction as opposite motions. Movements in other planes help you categorize shoulder motion: flexion and extension occur in the sagittal plane (front-to-back movements), while rotation (internal/external) and horizontal movements occur in the transverse plane. The oblique plane isn't used for standard, primary planar descriptions of these common shoulder actions. So, shoulder abduction occurs in the frontal plane.

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4. Which of the following lists contains the muscles that contribute to wrist extension?

A. Abductor pollicis longus and extensor pollicis brevis

B. Extensor carpi ulnaris, extensor digitorum, extensor carpi radialis longus and extensor carpi radialis brevis

C. Flexor carpi radialis, flexor digitorum profundus

D. Flexor carpi ulnaris and extensor carpi ulnaris

Wrist extension is generated by muscles on the back of the forearm that cross the wrist and pull the hand backward. The main wrist extensors are the extensor carpi radialis longus, extensor carpi radialis brevis, and extensor carpi ulnaris. The extensor digitorum also crosses the wrist and can contribute to wrist extension when the fingers are extended or stabilized. Together, these muscles form the primary group responsible for extending the wrist, making the set that includes ECU, ECRL, ECRB, and EDC the best match. The other options include wrist flexors or thumb-focused muscles, which do not drive wrist extension as their main action.

5. Which type of exercise is most appropriate for a client with weak triceps?

A. Open chain

B. Isometric

C. Closed chain

D. Plyometric

When a client has weak triceps, closed-chain exercises are most appropriate because the hand is fixed to a surface and the movement requires a coordinated push that recruits the triceps along with shoulder and chest stabilizers. This setup promotes joint stability, functional muscle activation, and the ability to progressively load the movement safely as strength improves. A classic example is a floor or wall push-up, where the body weight provides resistance through elbow extension while the hands stay in contact with a stable surface. As strength builds, you can increase demand with incline or decline push-ups or by adding resistance while maintaining form. Open-chain exercises isolate the triceps more directly (like pushdowns or extensions), which can be useful later for targeted strengthening but may not offer the same joint stability and functional transfer when weakness is present. Isometric work can help activate the muscle, but it won't develop dynamic strength and functional movement patterns. Plyometrics introduce high forces and speed, which isn't appropriate for someone with weak triceps.

6. Damage to the radial nerve typically results in which functional loss?

A. Median nerve: loss of forearm and thumb opposition

B. Ulnar nerve: loss of thumb adduction

C. Carpal tunnel syndrome

D. Radial nerve: loss of elbow, wrist, finger and thumb extension

The radial nerve is the main motor supplier for the extensor muscles of the arm and forearm, so it controls straightening the elbow, wrist, fingers, and thumb. When it's damaged, the triceps can't extend the elbow and the forearm extensors can't extend the wrist or the digits, including the thumb. This produces a classic inability to straighten the elbow and to extend the wrist and fingers, often seen as a wrist drop. This pattern is distinct from median nerve deficits (which affect thumb opposition) and ulnar nerve deficits (which affect thumb adduction), and from carpal tunnel syndrome (median nerve compression with different sensory/motor signs). So the typical functional loss with radial nerve injury is loss of elbow, wrist, finger, and thumb extension.

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7. Which statements describe the primary movement and insertion of the biceps brachii?

A. Insertion at radial tuberosity; Flex elbow and flex the shoulder

B. Flex elbow and flex the shoulder; Insertion at the radial tuberosity

C. Extend the elbow; Insertion at radial tuberosity

D. Pronation of forearm; Insertion at coronoid process

The biceps brachii functions across two joints, so its actions include moving the elbow and providing some shoulder assistance. Its tendon inserts on the radial tuberosity (with the bicipital aponeurosis continuing toward the forearm), which is where the force pulls to produce elbow motion. The primary action at the elbow is to flex the elbow, and when the forearm is supinated, the muscle also works to rotate the forearm more effectively. The long head crosses the shoulder joint, so it can contribute to shoulder flexion as well, though elbow flexion is the main movement. So the best description is that the biceps brachii flexes the elbow and can assist shoulder flexion, with insertion at the radial tuberosity. The other statements conflict with this: elbow extension is not a primary action, the coronoid process is not where the biceps inserts, and pronation is not the action of the biceps (it mainly supinates the forearm).

8. The extensor hood is another name for which structure?

A. Dorsal interosseous membrane

B. Flexor tendon sheath

C. Extensor expansion ligament

D. Ulnar collateral ligament

The extensor hood is the dorsal digital expansion, the extensor expansion ligament that forms the expanded extensor mechanism over the fingers. It develops from the extensor digitorum tendon as it splits into a central slip and two lateral bands, which then blend with the lumbricals and interossei to create a hood that attaches to the phalanges. This thickened tissue is what coordinates extension of the finger joints with intrinsic muscle action, and that's why the extensor hood is another name for the extensor expansion (dorsal digital expansion). Other structures listed are different: the dorsal interosseous membrane lies between metacarpals on the dorsum, the flexor tendon sheath surrounds the flexor tendons, and the ulnar collateral ligament supports the thumb joint.

9. Which bone forms the floor of the anatomical snuffbox?

A. Scaphoid

B. Capitate

C. Lunate

D. Trapezium

The snuffbox is a small hollow on the dorsum of the hand at the base of the thumb, bounded by the tendons of the thumb extensors. The floor of this hollow is formed by the carpal bones underneath, primarily the scaphoid, with the trapezium contributing at the lateral edge. This is why tenderness in this area points to a scaphoid injury, since the bone directly beneath the snuffbox forms its base. The other bones listed don't form the floor in the same way, and while the trapezium helps at the edge, the scaphoid is the main bone associated with the floor.

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10. Which plane is primarily associated with abduction and adduction movements?

A. Sagittal plane

B. None

C. Coronal/Frontal plane

D. Transverse plane

Abduction and adduction happen in the coronal (frontal) plane. This plane divides the body into front and back portions, and movements that move a limb away from or toward the midline occur within it. For example, lifting the arm out to the side is abduction in this plane, and bringing the arm back toward the body is adduction. In contrast, flexion and extension mainly occur in the sagittal plane, and rotation occurs in the transverse plane. So the coronal/frontal plane is the one primarily associated with abduction and adduction.

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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://humanfunctions1.examzify.com

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

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