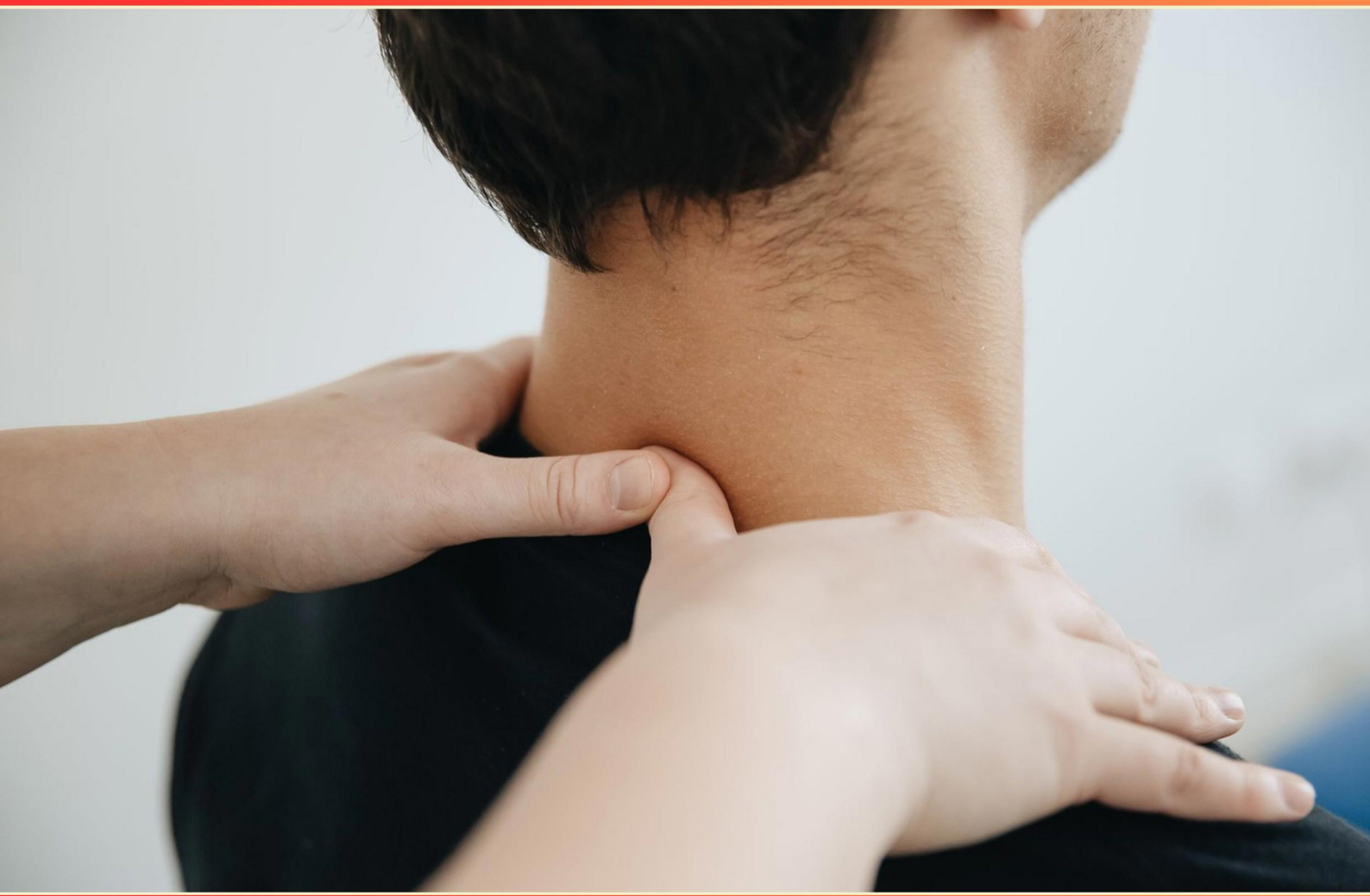
LECOM-SH OPP 1001 – OSTEOPATHIC PRINCIPLES AND PRACTICES EXAM 1 PRACTICE TEST (SAMPLE)

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. Which statement correctly describes rib head motion in Exhalation Dysfunction?

A. Anterior cephalad; Posterior cephalad

B. Anterior cephalad; Posterior caudad

C. Anterior caudad; Posterior caudad

D. Anterior caudad; Posterior cephalad

2. Which statement about segmentalization of visceral innervation is correct?

A. Visceral afferents travel independently of sympathetic fibers.

B. Segmentalization applies to cranial nerves.

C. Visceral afferents travel with pre- and post-ganglionic sympathetic fibers and share the same spinal segment of origin.

D. Visceral innervation follows a random pattern.

3. Which step is performed during SOAP after collecting data?

A. Collect data (history of prob & necessary diagnostics)

B. Evaluate/Synthesize Data

C. Differential Diagnosis (DDx)

D. Management Plan (OMT?)

4. Which statement best reflects segmentalization of visceral innervation (SANS)?

A. The sympathetic fibers for an organ originate from the same spinal level as the organ and visceral afferents share that segmental origin.

B. The sympathetic fibers for an organ originate from different spinal levels than the organ.

C. Segmentalization applies only to somatic nerves.

D. Visceral afferents travel with parasympathetic fibers.

5. Which statement describes direct manipulation?

A. The joint moves away from the barrier toward ease.

B. The joint moves toward and beyond the barrier.

C. The joint remains within the barrier.

D. The joint is gently vibrated.

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6. Which quote is attributed to A.T?

A. The fascia is the place to look for cause of disease and the place to consult and begin the action of remedies in all diseases.

B. Implicit in the term 'somatic dysfunction' is the notion that manipulation is appropriate, effective, and sufficient treatment for it.

C. Sustained sympathetic activity is a common factor in disease.

D. To accomplish this task, it is necessary to teach the fingers to feel, see, think and know.

7. Which axis is associated with sacral base motion (sacroiliac) that includes anterior (flexion, nutation) and posterior (extension, counter nutation) components?

A. Postural Axis

B. Hip Bone Axis

C. Innominate Axis

D. Vertical Axis

8. Parasympathetic innervation for the upper GI tract to the greater curvature and pyloric sphincter is supplied by which nerve?

A. Right Vagus

B. Left Vagus

C. Pelvic Splanchnics

D. Glossopharyngeal Nerve

9. Who said 'To obtain good results, we must blend ourselves and travel in harmony with Nature's truths'?

A. Carl Philip McConnell

B. Walt Whitman

C. A.T. Still

D. Hippocrates

10. Which term describes the tissue's recoverability after stretching?

A. Adaptability

B. Plasticity

C. Elasticity

D. Viscosity

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Answers

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

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Explanations

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1. Which statement correctly describes rib head motion in Exhalation Dysfunction?

A. Anterior cephalad; Posterior cephalad

B. Anterior cephalad; Posterior caudad

C. Anterior caudad; Posterior caudad

D. Anterior caudad; Posterior cephalad

In exhalation dysfunction, the rib is held in the exhaled position, which shows a specific pattern at the rib head: the anterior (costosternal) end tends to be directed toward the caudad direction, while the posterior (costovertebral) end tends to be directed toward the cephalad direction. So the rib head appears as anterior caudad and posterior cephalad. This contrasts with other patterns where the ends would both move in the same direction or in opposite directions that don't match the exhalation-restricted posture.

2. Which statement about segmentalization of visceral innervation is correct?

A. Visceral afferents travel independently of sympathetic fibers.

B. Segmentalization applies to cranial nerves.

C. Visceral afferents travel with pre- and post-ganglionic sympathetic fibers and share the same spinal segment of origin.

D. Visceral innervation follows a random pattern.

Visceral sensation follows a segmental pattern because the visceral afferent fibers travel with the sympathetic nerve pathways and share the same spinal segment of origin as those efferents. The sympathetic system originates in the thoracolumbar spinal cord (the relevant segments), and the visceral afferents that carry sensory information from the visera travel with both preganglionic and postganglionic sympathetic fibers back toward the spinal cord, entering at the same segment levels. This organization explains why visceral pain is often referred to a somatic area served by the same spinal segment (dermatome), rather than appearing in unrelated regions. The other ideas don't fit: visceral afferents do not travel independently of sympathetic fibers; segmentalization is a spinal, not cranial-nerve, concept; and visceral innervation is not random—it's organized by the same spinal segments as the sympathetic pathways.

3. Which step is performed during SOAP after collecting data?

A. Collect data (history of prob & necessary diagnostics)

B. Evaluate/Synthesize Data

C. Differential Diagnosis (DDx)

D. Management Plan (OMT?)

After you've gathered the patient's history and the exam findings (the data collection phase), the next SOAP step is to interpret what those findings mean. This is the Evaluate/Synthesize Data stage, where you integrate all information, identify patterns, weigh possibilities, and form the diagnostic impression or differential diagnosis. It's about turning raw data into a coherent assessment that explains the patient's problems and guides the plan. The differential diagnosis is part of this assessment, but the broader task is synthesizing the data into an organized conclusion. Only after this assessment do you move on to the management plan.

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4. Which statement best reflects segmentalization of visceral innervation (SANS)?

A. The sympathetic fibers for an organ originate from the same spinal level as the organ and visceral afferents share that segmental origin.

B. The sympathetic fibers for an organ originate from different spinal levels than the organ.

C. Segmentalization applies only to somatic nerves.

D. Visceral afferents travel with parasympathetic fibers.

Visceral innervation is organized by spinal segments, so the sympathetic supply to an organ and the sensory nerves from that organ share the same spinal level. The sympathetic neurons originate in the thoracolumbar region and reach the organ through the sympathetic chain or prevertebral ganglia, and the visceral afferents travel along these same sympathetic pathways back to the corresponding spinal segment. This linkage explains why pain from an organ is often felt in the skin territory of the same spinal level (referred pain). That's why the statement describing the sympathetic fibers for an organ as originating from the same spinal level as the organ, with visceral afferents sharing that segmental origin, is the best reflection of SANS. The other ideas conflict with this pattern—either suggesting different spinal levels, claiming segmentation only applies to somatic nerves, or asserting that visceral afferents travel with parasympathetic fibers.

5. Which statement describes direct manipulation?

A. The joint moves away from the barrier toward ease.

B. The joint moves toward and beyond the barrier.

C. The joint remains within the barrier.

D. The joint is gently vibrated.

Direct manipulation involves applying forces to move a joint toward the restrictive barrier—the point where motion is limited—and, when appropriate, through and beyond that barrier to release the restriction. This is why the statement describing the joint moving toward and beyond the barrier best fits. Indirect techniques move away from the barrier toward ease, so they don't describe direct manipulation. Staying within the barrier or using vibration alone doesn't define the direct approach.

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6. Which quote is attributed to A.T?

A. The fascia is the place to look for cause of disease and the place to consult and begin the action of remedies in all diseases.

B. Implicit in the term 'somatic dysfunction' is the notion that manipulation is appropriate, effective, and sufficient treatment for it.

C. Sustained sympathetic activity is a common factor in disease.

D. To accomplish this task, it is necessary to teach the fingers to feel, see, think and know.

The statement about fascia being the place to look for the cause of disease and the starting point for remedies aligns with A.T. Still's fundamental osteopathic view that the connective tissue network governs health and disease and is the primary avenue for evaluation and intervention. This perspective places the fascia at the center of both diagnosis and therapy, suggesting that restoring the fascia's proper function can initiate healing throughout the body. That emphasis on fascia as the key medium of disease and remedy is characteristic of Still's early osteopathic principles. The other quotes reflect ideas that appeared later or in different contexts within osteopathy, such as the notion that manipulation is the sole or sufficient treatment or statements about sympathetic activity being a common disease factor, which are not as closely tied to Still's core attribution. A line about teaching the fingers to feel, see, think, and know touches on palpation skills in osteopathy but isn't a widely recognized attribution to Still.

7. Which axis is associated with sacral base motion (sacroiliac) that includes anterior (flexion, nutation) and posterior (extension, counter nutation) components?

A. Postural Axis

B. Hip Bone Axis

C. Innominate Axis

D. Vertical Axis

Nutation and counternutation describe the sacral base tilting forward and backward within the pelvis, and this motion occurs about the postural axis. As the body assumes or changes posture (standing, bending, lifting), the sacrum rotates around this horizontal axis near the level of S2, producing anterior (nutation) and posterior (counternutation) motions. The other axes describe different motions (for example, vertical axis relates to sacral torsions around a vertical line, while innominate/hipbone concepts describe movement of the pelvic bones relative to the sacrum), but they do not account for the sacral base's anterior-posterior tilting that characterizes nutation and counternutation.

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8. Parasympathetic innervation for the upper GI tract to the greater curvature and pyloric sphincter is supplied by which nerve?

A. Right Vagus

B. Left Vagus

C. Pelvic Splanchnics

D. Glossopharyngeal Nerve

Parasympathetic input to the foregut, including the stomach up to the pylorus, travels with the vagus nerves. After passing into the abdomen, the left vagus forms the anterior vagal trunk, which supplies parasympathetic fibers to the stomach regions that include the greater curvature and the pyloric sphincter, helping regulate gastric motility and emptying. The right vagus forms the posterior trunk and contributes to other portions of the stomach. Pelvic splanchnics serve the hindgut, and the glossopharyngeal nerve is not the primary source of foregut parasympathetic supply.

9. Who said 'To obtain good results, we must blend ourselves and travel in harmony with Nature's truths'?

A. Carl Philip McConnell

B. Walt Whitman

C. A.T. Still

D. Hippocrates

Healing in osteopathic thought comes from aligning with nature's laws and supporting the body's own ability to heal. The quote expresses that idea most directly, embodying Andrew Taylor Still's philosophy as the founder of osteopathy: good medical results come when the healer blends with nature and follows its truths, promoting the body's self-healing processes. Hippocrates valued natural healing but the specific sentiment here is characteristic of Still. Walt Whitman is a poet, not a physician, and Carl Philip McConnell isn't known for this osteopathic principle. So the person who said it is A.T. Still.

10. Which term describes the tissue's recoverability after stretching?

A. Adaptability

B. Plasticity

C. Elasticity

D. Viscosity

Elasticity is the tissue's ability to return to its original length after deforming forces are removed. When you stretch a tendon or ligament, the elastic components—like elastin fibers in the connective tissue—recoil to restore shape and length, often quite quickly. This quick rebound distinguishes elasticity from plasticity, where deformation remains after the load is removed. Viscosity describes time-dependent flow and gradual deformation rather than immediate recovery, and adaptability refers to longer-term changes in response to conditions rather than instantaneous rebound. In living tissues, there can be viscoelastic behavior (a mix of elastic rebound and slow deformation), but the recoverability after stretch is the hallmark of elasticity.

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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://lecomshopp1001exam1.examzify.com

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

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