

# NHI EASTERN KINESIOLOGY PRACTICE TEST (SAMPLE)

**STUDY GUIDE**



**SAMPLE STUDY GUIDE  
WITH LIMITED QUESTIONS**

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THE FULL VERSION STUDY GUIDE**

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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.

# 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!

## Questions

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- 1. Which muscles compose the agonists for shoulder extension?**
  - A. Latissimus Dorsi, Deltoid Posterior, Triceps Brachii, Pectoralis Major Lower Fibers
  - B. Pectoralis Major Upper Fibers, Deltoid Anterior, Biceps Brachii
  - C. Supraspinatus and Infraspinatus
  - D. Latissimus Dorsi Only
- 2. Which term describes a broad bump on a bone?**
  - A. Process
  - B. Trochanter
  - C. Crest
  - D. Head
- 3. Which muscles act as agonists in neck extension?**
  - A. SCM and Scalenes
  - B. Trapezius and Levator Scapulae
  - C. Latissimus Dorsi
  - D. Pectoralis Major
- 4. Which muscle inserts on the proximal, medial shaft of the tibia at pes anserinus tendon?**
  - A. Semitendinosus
  - B. Semimembranosus
  - C. Gastrocnemius
  - D. Biceps femoris
- 5. Levator scapula originates from which vertebral transverse processes?**
  - A. Spinous processes of C7-T1
  - B. Occipital bone
  - C. Transverse processes of 1st-4th cervical vertebrae
  - D. Spinous processes of T1-4

- 6. Pectoralis minor inserts on which part of the scapula?**
- A. Medial surface of coracoid process
  - B. Anterior surface of medial border of the scapula
  - C. Medial border of scapula near inferior angle
  - D. Superior border of scapula
- 7. Which muscles act as agonists in right lateral flexion of the neck?**
- A. Right SCM, Right Scalenes, Right Trapezius, Right Levator Scapulae
  - B. Left SCM, Left Scalenes, Left Trapezius, Left Levator Scapulae
  - C. Pectoralis Major
  - D. Latissimus Dorsi
- 8. Semitendinosus originates from which structure?**
- A. Ischial tuberosity
  - B. Proximal, medial shaft of tibia
  - C. Greater trochanter
  - D. Head of fibula
- 9. Which muscle inverts the foot?**
- A. Peroneus longus
  - B. Tibialis posterior
  - C. Tibialis anterior
  - D. Extensor digitorum longus
- 10. Which muscle serves as the agonist for horizontal abduction of the shoulder?**
- A. Pectoralis Major, Deltoid (Anterior)
  - B. Latissimus Dorsi, Teres Major
  - C. Trapezius, Levator Scapulae
  - D. Deltoid (Posterior)

## **Answers**

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

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## **Explanations**

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## 1. Which muscles compose the agonists for shoulder extension?

- A. Latissimus Dorsi, Deltoid Posterior, Triceps Brachii, Pectoralis Major Lower Fibers**
- B. Pectoralis Major Upper Fibers, Deltoid Anterior, Biceps Brachii
- C. Supraspinatus and Infraspinatus
- D. Latissimus Dorsi Only

Shoulder extension is the action of moving the arm backward at the glenohumeral joint. The muscles that actively produce this motion are those that pull the humerus posteriorly: latissimus dorsi provides powerful extension and adduction; the posterior fibers of the deltoid assist in extending the arm when it's elevated or abducted; the long head of the triceps brachii crosses the shoulder and contributes to extension, especially as the elbow is flexed; and the sternocostal (lower) portion of the pectoralis major can help extend the shoulder from a flexed position, aiding the backward pull of the humerus. Together they form the agonist group for this movement. In contrast, the anterior deltoid and the clavicular fibers of the pectoralis major primarily flex the shoulder, while the supraspinatus and infraspinatus are more about stabilization and external rotation, not primary extension.

## 2. Which term describes a broad bump on a bone?

- A. Process**
- B. Trochanter
- C. Crest
- D. Head

Think about bone landmarks and how they're named. A broad bump on a bone falls under the general term for a projection, which is called a process. A process is any outgrowth or protrusion from a bone, so it can describe a wide variety of shapes, including a broad bump. The other terms are more specific: a trochanter refers to a large, blunt bump on certain bones (like the femur); a crest is a narrow, prominent ridge; a head is the rounded end of a bone that typically forms part of a joint. So the broad bump fits best with process because it's a general description of a projecting area.

## 3. Which muscles act as agonists in neck extension?

- A. SCM and Scalenes
- B. Trapezius and Levator Scapulae**
- C. Latissimus Dorsi
- D. Pectoralis Major

Neck extension is produced by muscles on the back of the neck that pull the head backward, and it works best when the shoulder girdle is stabilized. The trapezius, especially when both sides contract to hold the shoulder region in place, provides a posterior pull that helps extend the neck. The levator scapulae, likewise, can assist in this movement when the scapula is fixed, contributing to a backward pull on the cervical spine. Together, they act as agonists for neck extension by supporting the head's backward movement through their effects on the scapular region and cervical attachments. In contrast, the muscles that primarily flex or rotate the neck (like the sternocleidomastoid and scalenes) are not helping with extension, and muscles that mainly move the shoulder girdle or trunk (latissimus dorsi, pectoralis major) don't serve as primary neck extensors.

**4. Which muscle inserts on the proximal, medial shaft of the tibia at pes anserinus tendon?**

- A. Semitendinosus**
- B. Semimembranosus
- C. Gastrocnemius
- D. Biceps femoris

*Pes anserinus is the common tendon on the medial proximal tibia where three muscles attach: sartorius, gracilis, and semitendinosus. The muscle that specifically inserts on the proximal, medial shaft of the tibia as part of this pes anserinus is semitendinosus. Semimembranosus attaches to the posterior medial tibial condyle, not the proximal shaft; gastrocnemius inserts on the calcaneus, and the biceps femoris inserts on the head of the fibula.*

**5. Levator scapula originates from which vertebral transverse processes?**

- A. Spinous processes of C7-T1
- B. Occipital bone
- C. Transverse processes of 1st-4th cervical vertebrae**
- D. Spinous processes of T1-4

*The lift from the neck region is from the transverse processes of the upper cervical vertebrae, specifically the first through the fourth cervical vertebrae. This origin explains why the muscle reaches down to insert on the superior angle of the scapula and functions to elevate the scapula. It isn't connected to the spinous processes of the mid-back, the occipital bone, or the lower thoracic region, which is why those options don't fit.*

**6. Pectoralis minor inserts on which part of the scapula?**

- A. Medial surface of coracoid process
- B. Anterior surface of medial border of the scapula**
- C. Medial border of scapula near inferior angle
- D. Superior border of scapula

*The pectoralis minor attaches to the coracoid process of the scapula, specifically its medial aspect. This placement lets the muscle pull the scapula forward and downward toward the thoracic wall, helping stabilize the shoulder during arm movements. It does not insert along the medial border of the scapula or on its other borders, which are areas associated with other muscles such as serratus anterior.*

## 7. Which muscles act as agonists in right lateral flexion of the neck?

- A. Right SCM, Right Scalenes, Right Trapezius, Right Levator Scapulae
- B. Left SCM, Left Scalenes, Left Trapezius, Left Levator Scapulae
- C. Pectoralis Major
- D. Latissimus Dorsi

To bend the neck to the right, the muscles on the right side contract to pull the head toward that same side. The right sternocleidomastoid acts unilaterally to tilt the head to the right (and also helps rotate the face to the left), making it a primary contributor. The right scalenes similarly assist in lateral flexion to the right and support the motion. The right trapezius and right levator scapulae can also help with this bending when the neck or shoulder girdle is stabilized, adding to the effort from the SCM and scalenes. Together, these right-sided muscles provide the main force for right lateral neck flexion, while the left-side muscles would oppose this movement, and the chest and back muscles listed in other options don't primarily drive neck lateral bending.

## 8. Semitendinosus originates from which structure?

- A. Ischial tuberosity
- B. Proximal, medial shaft of tibia
- C. Greater trochanter
- D. Head of fibula

Semitendinosus is a hamstring muscle that starts from the ischial tuberosity, the sit bone of the pelvis. This location provides a strong anchor for a muscle that spans the hip and knee, allowing it to help with hip extension and knee flexion. From there, the tendon travels down the back of the thigh to insert on the proximal medial surface of the tibia (part of the pes anserinus). The other options aren't correct origins: the proximal medial tibia is where the muscle attaches distally, not where it begins; the greater trochanter is a hub for other hip muscles, not the hamstrings; and the head of the fibula is the insertion point for the long head of the biceps femoris, not the semitendinosus.

## 9. Which muscle inverts the foot?

- A. Peroneus longus
- B. Tibialis posterior
- C. Tibialis anterior
- D. Extensor digitorum longus

Inversion of the foot means turning the sole inward toward the midline. The muscle that most directly causes this action, especially when the foot is moving up (dorsiflexing), is the tibialis anterior. It runs along the front of the shin to the medial side of the foot (the first metatarsal and the medial cuneiform). When it contracts, it pulls the medial edge of the foot upward, producing inversion while also helping to dorsiflex the ankle. The other options don't match inversion as their primary action: the peroneus longus lies on the outside of the leg and tends to evert the foot; extensor digitorum longus primarily extends the toes and dorsiflexes the ankle (with only a minor inversion component); tibialis posterior does invert the foot as well, but its strongest effect is more pronounced when the foot is plantarflexed rather than in the usual dorsiflexion scenario.

**10. Which muscle serves as the agonist for horizontal abduction of the shoulder?**

- A. Pectoralis Major, Deltoid (Anterior)
- B. Latissimus Dorsi, Teres Major
- C. Trapezius, Levator Scapulae
- D. Deltoid (Posterior)**

*Horizontal abduction of the shoulder is produced primarily by the posterior portion of the deltoid. When the arm is raised to about 90 degrees in front of you, the fibers of the posterior deltoid line up to pull the upper arm backward and outward, moving it away from the midline in the horizontal plane. This makes it the prime mover for this action. Other choices don't fit as the main mover. The pectoralis major and the anterior deltoid are more involved in flexion and horizontal adduction of the shoulder. Latissimus dorsi and teres major are strong internal rotators and adductors, pulling the arm toward the body. The trapezius and levator scapulae mainly move the scapula and don't directly drive horizontal abduction at the shoulder joint.*

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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](mailto:hello@examzify.com).

Or visit your dedicated course page for more study tools and resources:

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

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