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ZAPOROZHYE STATE MEDICAL UNIVERSITY
DEPARTMENT OF PHYSICAL REHABILITATION,
SPORTS MEDICINE, PHYSICAL TRAINING AND HEALTH

TEST BOOK
ON PHYSICAL REHABILITATION AND SPORTS MEDICINE

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TESTS TO TOPIC

«Sports medicine.

Complex medical inspection during employment by physical exercises. Investigation and an estimation of physical development of the person»

1. Sports medicine is a science which studies:
 - A. Influence of going in for sports on a sportsman's body,
 - B. Positive and negative influence of exercise stress with different intensity on a body of a healthy and ill person,
 - C. Influence of going in for physical education on a human body,
 - D. Influence of hypodynamia on a healthy human body,
 - E. Influence of hyperdynamia on a healthy human body.

2. The main purpose of sports medicine is:
 - A. Optimization of human locomotor activity for health saving and health promotion,
 - B. Optimization of regime of work and rest.
 - C. Proper organization of trainings and competitions,
 - D. Prophylactic medical examination of population,
 - E. Improve of sportsmen's performance capability.

3. Main tasks of medical supervision are:
 - A. Study of processes of adaptation to exercise stress,
 - B. Estimation of conditions for carrying out trainings and competitions,
 - C. Estimation of fatigue level while the sporting activity,
 - D. Study of psycho-physiological condition during the process of trainings and competitions,
 - E. Estimation of physical development, functional abilities and health conditions in people, who go in for different types of bodily exercises

4. Functional systolic murmur after changing the position of the body (in the position left lateral decubitus position):

- A. Weakens,
- B. Increases,
- C. Does not change,
- D. Cannot be auscultated,
- E. Changes the timbre.

5. In case of complaints of precordialgia what must be carried out in the first place?

- A. Phonocardiography,
- B. Polycardiography,
- C. Electrocardiography,
- D. Reovasography,
- E. Echocardiography.

6. Organic systolic murmur after exercise tolerance test:

- A. Cannot be auscultated,
- B. Weakens,
- C. Does not change,
- D. Increases,
- E. Changes the timbre.

7. Complex methodology of medical examination of people who deal with different types of bodily exercises, includes the following parts:

- A. General and sports anamnesis, somatoscopy, anthropometry, functional testing,
- B. Medical- pedagogical control during trainings and competitions.

- C. External examination, spirometry, veloergometry,
- D. Sanitary and hygienic examination of places of training and competitions,
- E. Medical provision of sports competitions.

8. Main signs of long-term adaptation to systematic exercise stress are:

A. Insignificant bradycardia and hypotension, moderate hypertrophy of mainly right heart
Insignificant bradycardia and hypotension, moderate hypertrophy of mainly right heart,

B. Full-blown bradycardia and hypotension, significant myocardial hypertrophy.

C. Moderate bradycardia and hypotension, insignificant myocardial hypertrophy,

D. Insignificant bradycardia and hypotension, moderate hypertrophy of mainly left heart,

E. Physiological bradycardia, physiological hypotension, moderate myocardial hypertrophy, conjugated with adequate development of capillary network.

9. Functional systolic murmur after exercise tolerance test:

- A. Weakens,
- B. Increases,
- C. Does not change,
- D. Cannot be auscultated,
- E. Changes the timbre.

10. Organical systolic murmur changing the position of the body (in the position left lateral decubitus position):

- A. Weakens,
- B. Increases,

- C. Does not change,
- D. Cannot be auscultated,
- E. Changes the timbre.

11. Expressed ventricular heart hypertrophy is a sign of:

- A. Adaptation to optimal exercise stress,
- B. Influence of inadequate (extreme) exercise stress,
- C. Organic heart pathology,
- D. Physiological cardiac enlargement,
- E. Adaptation to training and competition loads.

12. Bradycardia lower than 40 beats per minute in highly-trained sportsmen is:

- A. A change which requires additional examination for excluding heart block,
- B. A severe pathological life-threatening change,
- C. A Physiological criterion of being trained,
- D. A Pre-pathological shift,
- E. A sign which always gives evidence of, impaired conductivity function.

13. Main indicators of a physical development of a person:

- A. Length of a body, body weight, chest circumference at inhaling and exhaling, lung vital capacity, muscular strength, sizes of extremities and trunk, thickness of subcutaneous fat, form of a back,
- B. Height, weight, chest circumference, lung vital capacity, muscular strength, transversal and longitudinal sizes of extremities and trunk, somatotype, body weight structure.
- C. Height, weight, chest circumference, strength of back muscles, breath holding time, somatotype, length of lower extremities, width of pelvis,

D. Height, weight, chest circumference, lung vital capacity, muscular strength, sizes of extremities and trunk, thickness of subcutaneous fat,

E. Height, body weight, thickness of subcutaneous fat, form of a back and chest, lung vital capacity.

14. Main methods of estimating physical development are:

A. Methods of somatoscopy and anthropometry,

B. Methods of correlation and standardization.

C. Methods of sigma deviations and anthropometrical standards,

D. Methods of standards, anthropometric profile, indices and correlation,

E. External examination, percussion, auscultation, palpation.

15. Name human somatotype (according to Chernorutskiy):

A. Normosthenic, asthenic, hypersthenic,

B. Normotonic, asthenic, hypersthenic,

C. Normotonic, hypotonic, hypertensive,

D. Normosthenic, hypotonic, hypertensive,

E. Normosthenic, hyposthenic, hypertensive.

16. Normal size of physiological spinal curvatures are:

A. 3-4 cm,

B. 5-6 cm,

C. 1-2 cm,

D. Over 6 cm,

E. Up to 1 cm.

17. Normal thickness of subcutaneous fat is:

A. In males 0.5 cm, in females 1 cm,

B. In males 0.8-1 cm, in females 1.5-1.8 cm,

- C. In males 2-2.5 cm, in females 3.5-4 cm,
- D. In males 1.5 cm, in females 2.5 cm,
- E. In males 1.5-2 cm, in females 2-3 cm.

18. Methods of physical development studies are:

- A. Somatoscopy and anthropometry,
- B. Anamnesis and medical examination of organs and systems.
- C. Functional testing,
- D. Methods of standards, anthropometric profile, indices and correlation,
- E. External examination, percussion, auscultation palpation.

19. Normal forms of a chest:

- A. Cone-shaped, barrel-shaped, hollow,
- B. Cone-shaped, circular, flat,
- C. Cone-shaped, cylinder-shaped,
- D. Conic, cylindrical, circular,
- E. Conic, cylindrical, flattened.

20. Chest excursion on average in a not trained person is:

- A. In males 4-5 cm, in females 1.5-2.5 cm,
- B. In males 6-8 cm, in females 3-6 cm,
- C. In males 15-20 cm, in females 12-15 cm,
- D. In males 10-15 cm, in females 8-10 cm,
- E. In males 2-3 cm, in females 1-2 cm.

21. Carrying out anthropometry requires observance of certain conditions:

- A. Investigation is carried out on an empty stomach in the morning,
- B. Sleep before the investigation should be not less than 7 hours,
- C. Investigation is carried out on an empty stomach at any time of the day,

- D. Investigation is carried out after a 30-minute rest,
- E. It is not allowed to take alcohol and smoke before the investigation.

22. While carrying out somatoscopy the following parameters are estimated:

- A. Form and motility of backbone and joints,
- B. Cardiac and lung borders, cardiac impulse, chest excursion,
- C. Form of a chest and back, posture, level of muscular development, adipopexis,
- D. Form of a chest and back, lung vital capacity, muscular strength and tone, chest circumference,
- E. Muscular strength, body mass and length, muscle shape.

23. While measuring chest circumference tape measure is applied:

- A. On the upper shoulder-blade edge, in males above a nipple, in females – above a mammary gland,
- B. On the lower shoulder-blade edge, in males under a nipple, in females – under a mammary gland,
- C. Under shoulder-blade angle, in males on the lower edge of areolas, in females – in places of IV rib attachment to chest or above a mammary gland,
- D. On the lower edge of shoulder-blade and on the V intercostal space,
- E. Through the middle of shoulder-blade and on the III intercostal space.

24. Lung vital capacity is measured using the following method:

- A. Spirometry,
- B. Spiroergometry,
- C. Sphygmography,
- D. Electic spirometry,
- E. Spirotonometry.

25. Consistent component which in a bigger degree influences health formation is:

- A. Lifestyle,
- B. Living conditions,
- C. Activity of health care institutions,
- D. Environment,
- E. Heredity.

26. Kettle index is:

- A. Body weight/height ratio,
- B. Wrist dynamometry/body weight ratio,
- C. Height/body weight ratio,
- D. Heart rate 1 minute after the load,
- E. All answers mentioned above are correct.

27. Index which characterizes final outcome of prophylaxis work is:

- A. Level of somatic health,
- B. Lethality,
- C. Death rate,
- D. Level of physical capacity for work,
- E. Morbidity.

28. Average value of life cycle in males is (ml/kg):

- A. 55-60,
- B. 45-50,
- C. 50-55,
- D. 35-40,
- E. No correct answer.

29. Generally accepted conception of “individual” health (according to WHO) is:

- A. Condition of complete physical, mental and social well being and not only absence of diseases,
- B. Condition which is characterized by absence of diseases, physical defects and pre-morbid conditions,
- C. Condition of wellbeing caused by absence of diseases and pathological conditions,
- D. Condition which is characterized by absence of diseases,
- E. Absence of pathological conditions of a body in case of remaining wellbeing.

30. Mean value of life cycle in women is (ml/kg):

- A. 45-50,
- B. 35-40.
- C. 50-55,
- D. 55-60,
- E. No correct answer.

31. After examination of a man of about 40 years old adaptation potential value in the blood circulation system was 3.0 according to P.M. Bayevskiy. Give your estimation of this result:

- A. Tension of adaptation mechanisms,
- B. Satisfactory adaptation,
- C. Normal adaptation,
- D. Adaptation failure,
- E. Insufficient information for drawing the conclusion.

32. State the most typical trends in main indices dynamics, which characterize health of Ukrainian population (for the last 10 years):

- A. Decrease in birth rate, growth of overall death rate, low indices of life expectancy,
- B. Growth of overall death rate and high levels of child mortality.
- C. Growth of death rate among people in the working ages,
- D. Stable structure of morbidity, reasons of death and disability,
- E. Decrease of infection morbidity level.

33. The main reason of death in case of overweight is:

- A. Cardiovascular diseases,
- B. Injuries and accidents,
- C. Respiratory diseases,
- D. Oncological diseases,
- E. Endocrine diseases.

34. Nosological methods of individual health estimation are:

- A. Diagnosis based on existing disease nomenclature,
- B. Estimation of physical development level according to G.L. Apanasenko,
- C. Determination of myocardial tension index,
- D. Determination of a biological age,
- E. Determination of endogenous risk factors of coronary heart disease.

35. Quantitative estimation of somatic health is based upon mediate characteristic:

- A. Maximal aerobic ability,
- B. Maximal oxygen debt,
- C. Maximal capability for enduring nervous tensions,

- D. Value of lactate threshold,
- E. Maximal anaerobic capability.

36. Direct methods of estimation individual health are:

- A. Estimation of level of physical health developed by G.L. Apanasenko,
- B. Determination of adaptation potential according to P.M. Bayevskiy,
- C. Determination of index of myocardial stretch,
- D. Diagnosis based on existing nomenclature of diseases,
- E. Study of causes and structure of a disease.

37. Constituent component which is the most minor in forming health:

- A. Activity of health care institutions,
- B. Lifestyle,
- C. Living conditions,
- D. Environment,
- E. Heredity.

38. The most important index which should be taken into account while developing primary prophylaxis measures:

- A. Level of somatic health,
- B. Condition of environment,
- C. Future mean life span,
- D. Morbidity,
- E. Index of rendering medical assistance.

39. The leading cause of death in case of insufficient body weight is:

- A. Respiratory disease,
- B. Endocrine disease,
- C. Digestive tract disease,

- D. Cardiovascular disease,
- E. Diseases of urinogenital diseases.

40. Prenosological methods of estimating individual health are:

- A. Determination of myocardial stretch index,
- B. Estimation of level of physical development according to G.L.

Apanasenko,

- C. Diagnosis based on existing disease nomenclature,
- D. Determination of a biological age,
- E. Determination of endogenous risk factors of a coronary heart disease.

41. Birth-death ration is:

- A. Lung vital capacity/body weight ratio,
- B. 20 squats for 30 seconds,
- C. Body weight/height ration,
- D. Wrist strength/body weight ratio,
- E. Heart rate multiplied by systolic arterial blood pressure.

42. Physical ability to work must be tested after eating in:

- A. 1-1.5 hours,
- B. 15 minutes,
- C. 20-30 minutes,
- D. 10 minutes,
- E. 6-8 hours.

43. "Safe level" of somatic health for males according to G.L. Apanasenko is less than (ml/minutes/kg):

- A. 42,
- B. 35,

- C. 31,
- D. 46,
- E. No correct answer.

44. Mean value of force index in males is (%):

- A. No correct answer,
- B. 45-50,
- C. 50-55,
- D. 55-60,
- E. 35-40.

45. Mean value of force index in females is (%):

- A. 50-55,
- B. 45-50,
- C. 35-40,
- D. 55-60,
- E. No correct answer.

46. "Safe level" of somatic health for females according to G.L. Apanasenko is less than (ml/minutes/kg):

- A. 35,
- B. 31,
- C. 42,
- D. 46,
- E. No correct answer.

47. Physical health of a person mainly depends upon motion quality:

- A. Stamina,
- B. Dexterity,

- C. Flexibility,
- D. Speed,
- E. Strength.

48. Complex methods of estimating physical conditions are:

- A. Express system developed by G.L. Apanasenko,
- B. Finnish test,
- C. Test of Ruffe,
- D. Harvard step-test,
- E. Clinical veloergometry.

49. After examining a woman (30 years old) adaptation potential value of blood circulation system was 2.0 according to the method developed by R.M. Bayevskiy. Give your estimation of the result:

- A. Satisfactory adaptation,
- B. Insufficient information for drawing the conclusion.
- C. Tension of adaptation mechanisms,
- D. Adaptation failure,
- E. Unstable adaptation.

50. Index of Robinson is:

- A. Heart rate multiplied by systolic arterial blood pressure and divided by 100,
- B. Lung vital capacity/body weight ration,
- C. Heart rate multiplied by systolic arterial blood pressure,
- D. Body weight/height ration,
- E. All the options mentioned above are incorrect.

51. Mean value of index of Robinson in a healthy person is:

- A. 85-94,
- B. 60-40,
- C. 100-110,
- D. 120-80,
- E. No correct answer.

52. Which of the mentioned sets of indicators quite completely characterize public health:

- A. Demographic indices, physical development, morbidity, disability,
- B. Child mortality, average life expectancy, index of health, disability.
- C. Death rate, birth rate, natural population increase, morbidity, mortinatality,
- D. Demographic indices, physical development morbidity death rate, disability,
- E. Demographic indices, physical development, morbidity with temporal disability.

53. Indices which characterize health of population include all except:

- A. Physical ability to work,
- B. Demographical indices.
- C. Indices of physical development,
- D. Level and type of morbidity,
- E. Indices of pre-nosological conditions.

Answers to tests on the topic

«Sports medicine.

Complex medical inspection during employment by physical exercises.

Investigation and an estimation of physical development of the person»

Test	Answers	Test	Answers	Test	Answers
1	A	21	A	41	E
2	E	22	D	42	A
3	E	23	C	43	C
4	B	24	A	44	C
5	C	25	A	45	E
6	B	26	C	46	C
7	A	27	A	47	D
8	E	28	B	48	E
9	A	29	A	49	D
10	C	30	B	50	A
11	E	31	B	51	C
12	C	32	A	52	C
13	B	33	A	53	E
14	D	34	B		
15	A	35	A		
16	A	36	A		
17	B	37	E		
18	A	38	A		
19	E	39	D		
20	B	40	B		

TESTS TO TOPIC

«Investigation and an estimation of functional condition of an organism.

The medical conclusion»

1. In sportsmen within physiological appropriateness at rest the following things can be auscultated:

- A. Increased or mitigated heart sounds,
- B. Arrhythmic heart sounds,
- C. Organic systolic murmurs,
- D. Accent of II tone on aorta,
- E. Intensification of I tone above apex of heart.

2. During combined functional test of Letunov the following exercise stress are applied:

A. 20 squats for 30 seconds, running on the spot with a maximal pace with high hips for 15 seconds, running on the spot for 3 minutes with a pace of 180 steps per 1 minute,

B. Running on the spot for 15 seconds with high hips, 20 squats for 30 seconds, running on the spot for 3 minutes with a pace of 180 steps per 1 minute,

C. Running on the spot for 3 minutes with a pace of 180 steps per 1 minute, 20 squats for 30 seconds, running on the spot for 15 seconds with high hips,

D. 20 squats for 30 seconds, 60 jumps for 30 seconds, running on the spot for 3 minutes with a pace of 180 steps per 1 minute,

E. 60 jumps for 30 seconds, running on the spot for 3 minutes with a pace of 120 steps per 1 minute.

3. Typical dystonic reaction of a cardiovascular system on exercise stress is:

A. Against the background of insignificant pulse acceleration and increase of systolic pressure, diastolic pressure goes down to “0”,

B. Against the background of significant pulse acceleration systolic pressure quickly falls, diastolic pressure reaches “0”,

C. Against the background of significant pulse acceleration and increase of systolic pressure, diastolic pressure goes down to “0” for 2 minutes and more

Against the background of insignificant pulse acceleration and increase of systolic pressure, diastolic pressure goes down to “0”,

D. All indices increase,

E. All indices decrease.

4. Functional systolic murmur after exercise tolerance test:

A. Doesn't change,

B. Weakens and disappears,

C. Intensifies or weakens,

D. Intensifies,

E. Changes the timbre.

5. Healthy not trained males breath holding time at inhaling (Shtange test)

ranges:

A. 40-60 seconds,

B. 50-60 seconds,

C. 20-30 seconds,

D. 40-50 seconds,

E. 20-40 seconds.

6. Orthostatic sign allows us to estimate functional condition of:

A. Parasympathetic vegetative nervous system,

B. Central nervous system,

C. Cardiovascular system,

D. Sympathetic vegetative nervous system,

E. Vegetative nervous system.

7. Types of reactions of cardiovascular system in case of exercise stress:

A. Normotonic, hypotonic, hypertensive, dystonic, stepwise,

B. Normotonic, hypotonic, hypertensive, dyskinetic.

C. Normosthenic, asthenic, hypersthenic, dystonic, atonic,

D. Normosthenic, asthenic, hypertensive, stepwise, dyskinetic,

E. Normotonic, asthenic, hypertensive, dyskinetic, stepwise.

8. Main tasks which are resolved while carrying out most functional tests:

A. Evaluation of reaction type of organs and systems on a functional test,

B. Study of body adaptation mechanisms to conditions which changed.

C. Detection of hidden impaired functions of organs and systems,

D. All previous answers are correct,

E. There are incorrect answers.

9. After the test 20 squats for 30 seconds the examined person had a pulse increase from 12 beats per 10 seconds to 20 beats per 10 seconds, arterial pressure changed from 120/80 to 140/60 mm Hg. Determine the type of cardiovascular system reaction:

A. Normotonic,

B. Hypotonic.

C. Hypertensive,

D. Dystonic,

E. Stepwise.

10. While carrying out Genchi test the examined person does:

A. Ordinary exhalation,

B. Ordinary inhalation,

- C. Maximal inhalation,
- D. Maximal exhalation,
- E. Submaximal exhalation.

11. The main manifestation of economization in physiological functions at rest in trained people is:

- A. Increase of cardiac output,
- B. Reduction of diastole phase,
- C. Breath intensification and deepening,
- D. Sinus tachycardia,
- E. Sinus bradycardia.

12. Main signs of long-term adaptation of the cardiovascular system to optimal exercise stress (especially on improving stamina) are:

- A. Sinus bradycardia, physiological hypotension, moderate myocardial hypertrophy with corresponding development of coronary blood flow,
- B. Sinus bradycardia, moderate hypertension, hypertrophy of mainly left myocardium compartments,
- C. Sinus bradycardia, physiological hypotension, significantly manifested myocardial hypertrophy,
- D. Sinus bradycardia, hypotension, hypertrophy of mainly right myocardium compartments,
- E. Sinus bradycardia, physiological hypertension, moderate myocardial hypertrophy with corresponding development of coronary blood flow.

13. Breath-holding test mainly characterize the condition of:

- A. Vegetative nervous system,
- B. Cardiovascular system,
- C. System of external respiration,

- D. Central nervous system,
- E. Respiratory center.

14. Normal period of pulse and arterial pressure recovery during the test 20 squats for 30 seconds:

- A. In males – 4 minutes, in females – 5 minutes,
- B. Till the end of the first minute.
- C. In males up to 2.5 minutes, in females – up to 3 minutes,
- D. From 3 till 10 minutes,
- E. Recovery is not obligatory.

15. Organic systolic murmur after exercise tolerance test:

- A. Intensifies,
- B. Weakens.
- C. Doesn't change,
- D. Changes the timbre,
- E. Disappears.

16. What graduated exercise should be used during mass prophylaxis examination for determining functional condition of cardiovascular system in little trained people:

- A. 20 squats for 30 seconds,
- B. Combines test according to S.P. Letunov,
- C. Going up the stair with height 33 cm for 5 minutes,
- D. Going up the stair with height 40 cm for 5 minutes,
- E. Harvard step-test.

17. Healthy untrained men have breath holding time at exhaling (Test Genchi):

- A. 20-30 seconds,
- B. 15-25 seconds,
- C. 10-20 seconds,
- D. 15-30 seconds,
- E. 25-40 seconds.

18. By what parameters can the type of cardiovascular system reaction on standard exercise stress be determined?

- A. Pulse excitability, type of changes in systolic, diastolic and pulse arterial blood pressure,
- B. Changes in systolic, diastolic arterial blood pressure.
- C. Changes in heart rate,
- D. Changes in pulse rate and breathing,
- E. Changes in heart rate and pulse arterial blood pressure.

19. For normotonic type of cardiovascular system reaction on exercise stress the following characteristics are typical:

- A. Pulse increase up to 60-80%, moderate increase of systolic arterial blood pressure, certain (up to 10%) decrease in diastolic arterial blood pressure, increase in pulse arterial blood pressure up to 60-80%,
- B. Pulse increase up to 60-80%, moderate decrease of systolic, diastolic and pulse arterial blood pressure,
- C. Increase of pulse up to 60-80%, significant increase of systolic, diastolic and pulse arterial blood pressure,
- D. Increase of pulse over 100%, insignificant increase of systolic, diastolic, decrease of pulse arterial blood pressure,
- E. Increase of pulse over 100%, significant increase of systolic arterial blood pressure, significant decrease of diastolic arterial blood pressure.

20. After the test 20 squats for 30 seconds the examined person had pulse increase from 12 beats per 10 seconds to 25 beats per 10 seconds, arterial blood pressure changed from 120/80 to 180/95 mm Hg. Determine the type of cardiovascular system reaction:

- A. Normotonic,
- B. Hypertensive,
- C. Hypotonic,
- D. Dystonic,
- E. Stepwise.

21. Clinostatic test allows us to estimate functional condition of:

- A. Parasympathetic vegetative nervous system,
- B. Central nervous system,
- C. Vegetative nervous system,
- D. Sympathetic vegetative nervous system,
- E. Cardiovascular system.

22. In healthy untrained females breath holding time at inhaling (Test Shtange) ranges:

- A. 30-40 seconds,
- B. 20-40 seconds,
- C. 15-30 seconds,
- D. 40-60 seconds,
- E. 50-60 seconds.

23. Normal reaction of sympathetic vegetative system after changing body position from horizontal into vertical corresponds to the following changes:

- A. Increase of pulse rate on 20-25 beats/minute,
- B. Increase of pulse rate on 0-8 beats/minute,

- C. Increase of pulse rate on 10-16 beats/minute,
- D. Decrease of pulse rate on 10-16 beats/minute,
- E. Decrease of pulse rate on 8-14 beats/minute.

24. While carrying out Test Shtange the examined person makes:

- A. Maximal exhalation,
- B. Ordinary exhalation.
- C. Maximal inhalation,
- D. Submaximal inhalation,
- E. Ordinary inhalation.

25. Functional tests are:

- A. Precisely measured influence of different factors on the body to study reactions of main physiological systems on one influence or other,
- B. Influence of negative environmental factors on the body to study body endurance.
- C. Influence of different extreme factors on the body to study changes in main physiological systems,
- D. Influence of any exercise stress on the body to estimate adaptation mechanisms of functional systems,
- E. Influence of different stress factors on the body to study changes in main physiological systems.

26. Normal reaction of parasympathetic vegetative nervous system after changing body position from horizontal into vertical corresponds to the following changes:

- A. Decrease of pulse rate on 8-14 beats/minute,
- B. Increase of pulse rate on 10-16 beats/minute,
- C. Decrease of pulse rate on 20-25 beats/minute,

- D. Increase of pulse rate on 0-8 beats/minute,
- E. Decrease of pulse rate on 10-16 beats/minute.

27. While carrying out most functional tests the following things are estimated:

- A. Initial figures of indices,
- B. Recovery time of indices toward initial level,
- C. Changes of indices due to the influencing factor,
- D. Initial data of indices and their recovery time after the test,
- E. Initial figures of indices, their changes due to the test, recovery time.

28. Pathological types of cardiovascular system reaction to standard exercise stress are:

- A. Normotonic, hypertensive, hypotonic, dystonic,
- B. Hypertensive, hypotonic, stepwise, dystonic,
- C. Normotonic, hypotonic (asthenic),
- D. Hypersthenic, asthenic,
- E. Normotonic, asthenic, diatonic.

29. For hypertensive type of cardiovascular system reaction on exercise stress the following things are typical:

- A. Increase of pulse over 100%, significant increase of systolic, diastolic, arterial blood pressure,
- B. Pulse increase up to 60-80%, moderate decrease of systolic, diastolic, pulse arterial blood pressure
- C. Pulse increase up to 60-80%, moderate increase of systolic arterial blood pressure, decrease of diastolic and pulse arterial blood pressure,
- D. Increase of pulse over 100%, insignificant increase of systolic, diastolic arterial blood pressure, decrease of pulse arterial blood pressure.

E. Increase of pulse up to 60-80%, moderate increase of systolic blood pressure, certain (up to 10%) decrease of diastolic arterial blood pressure and increase of pulse arterial blood pressure.

30. Test 20 squats for 30 seconds is carried out after rest for:

- A. 1 minute,
- B. 5 minutes,
- C. 30 minutes,
- D. 1 hour,
- E. 1 day.

31. Absolute contradiction to carrying out load test is:

- A. Coronary insufficiency with frequent angina pectoris attacks, risk for myocardial infarction,
- B. Compensatory pulmonary heart disease,
- C. Singular extra systoles,
- D. Arterial hypertension with arterial blood pressure 160/100 mm Hg,
- E. Low voltage ECG.

32. Physiological premise for test PWC₁₇₀ is:

- A. Heart rate reaching maximal acceptable figure,
- B. Continuous increase of heart rate in the process of doing the current load,
- C. Directly proportional dependence between load capacity and heart rate,
- D. Stabilization of heart rate while doing the load,
- E. Inversely proportional dependence between load capacity and heart rate.

33. With the help of which test it is possible most exactly define physical work capacity:

- A. Submaximal test PWC₁₇₀,

- B. Test 20 squats for 30 seconds,
- C. Combined test developed by S.P. Letunov,
- D. Test of Kushelevskiy,
- E. Test of Ruffe.

34. Functional indication of reaching tolerance threshold to physical loads is:

- A. Decrease of diastolic arterial blood pressure up to 55 mm Hg,
- B. Increase of systolic arterial blood pressure up to 180 mm Hg,
- C. Increase of heart rate up to 160 beats/minute,
- D. Decrease of heart rate while doing the load,
- E. Sinus arrhythmia.

35. Indications for carrying out load test in clinic are all except for the following one:

- A. Deciding whether the person is ready to work,
- B. Selection and correction of mode movement,
- C. Estimation of functional condition and functional abilities of the body,
- D. Optimization of individual programs of physical rehabilitation and estimation of their efficiency,
- E. Differential diagnostics of musculoskeletal system diseases.

36. Functional indication of reaching tolerance threshold to physical loads in untrained person is:

- A. Increase of arterial blood pressure up to 200/110 mm Hg,
- B. Increase of pulse arterial blood pressure by 80% from initial figure,
- C. Decrease of diastolic arterial blood pressure by 10%,
- D. Increase of heart rate by 80% from initial figure,
- E. Increase of systolic arterial blood pressure by 25% from initial figure.

37. Average level of physical capacity for work of a healthy untrained male characterizes ability to do the work with powerfulness:

- A. 4.2 W/kg,
- B. 2.4 W/kg,
- C. 1.7 W/kg,
- D. 1.0 W/kg,
- E. 0.5 W/kg.

38. Clinical indication of reaching tolerance threshold to physical loads is:

- A. Increased sweating,
- B. Intensified and deep breathing.
- C. Appearance of internal chest pain,
- D. Insignificant hyperemia of face,
- E. Heartbeat.

39. While calculating powerfulness of physical load in case of stepergometry all indices are used except for one:

- A. Height while standing tall,
- B. Mass of a body.
- C. Height of a stair,
- D. Pace of going up,
- E. Correcting coefficient.

40. PWC_{170} means:

- A. Powerfulness of physical load in case of heart rate 170 beats/minute,
- B. Work to go up the stair,
- C. Work carried out for 170 seconds,
- D. Work in case of load on bicycle ergometer,
- E. Pace of pedaling while doing bicycle ergometry.

41. Indications for carrying out load test in sportsmen are the following except for one:

- A. Prognosis sports results in kinds of sports which develop stamina,
- B. Sports selection.
- C. Determination of functional abilities of a body,
- D. Building training program,
- E. Adjustment of work and rest mode.

42. Clinical indications of reaching tolerance threshold while carrying out load test are as follows except for one:

- A. Dizziness, sharp pain,
- B. Manifested dyspnea,
- C. Angina pectoris attack,
- D. Sweating and hyperemia of face,
- E. Refusal of the examined person from further testing.

43. ECG criterion of stopping the test with physical load is:

- A. Crescent-shaped segment ST more than 0.1 mm below isoline,
- B. Increase of heart rate up to 160 beats/minute.
- C. Increase of segment ST above isoline on 0.1 mm,
- D. Decrease of voltage in R wave by 25% in standard measurements,
- E. Increase in voltage of wave T in chest measurements per 1.5 times.

44. Methods of determining physical efficiency for work are as follows except for one:

- A. Test of Navakki,
- B. Test Rufye,
- C. Test PWC₁₇₀,

- D. 12-minute test developed by Couper,
- E. 1.5-mile test developed by Couper.

45. Optimal values of heart rate increase in the end of the 1st and 2nd stair loads while carrying out test PWC₁₇₀ are:

- A. 100-120 and 145-160 beats/minute,
- B. 145-160 and 170-190 beats/minute,
- C. 170-190 and 220-260 beats/minute,
- D. 90-100 and 120-140 beats/minute,
- E. 120-170 and 120-170 beats/minute.

46. While carrying out test Navakki force of initial load per 1 kg of the examined person body is:

- A. 2.0 Wt/kg,
- B. 3 Wt/kg,
- C. 0.75 Wt/kg,
- D. 0.5 Wt/kg,
- E. 1,0 Wt/kg.

47. Absolute contradiction for carrying out load testing is:

- A. Cardiac aneurysm and aneurysm of vessels,
- B. Sinus arrhythmia,
- C. Single premature contractions,
- D. Arterial hypertension with arterial blood pressure 170/100 mm Hg,
- E. Stable angina pectoris.

48. Tests on labor (load tests) imply registration of the following indices:

- A. After carrying out the load,
- B. Directly at the moment of carrying out the load,

- C. In restorative period,
- D. In 1 hour after carrying out the load,
- E. In 24 hours after carrying out the load.

49. Functional sign of achieving tolerance threshold to physical loads is:

- A. Decrease of arterial blood pressure over 25% of initial level,
- B. Increase of arterial blood pressure by 25% of initial level.
- C. Increase of heart rate by 80% of initial level,
- D. Increase of heart rate up to 170 beats/minute,
- E. Increase of pulse arterial blood pressure by 80% of initial level.

50. While carrying out load testing maximal acceptable heart rate in untrained people is calculated using the following formula:

- A. 200 minus age,
- B. 220 minus age,
- C. 170 minus age,
- D. 120 minus age,
- E. 270 minus age.

51. Relative contradictions for carrying out load testing are all of the following except for one:

- A. Obesity of II-III stage,
- B. Diabetes militus,
- C. Initial period of recovery after cardiac infarction (up to 3 months),
- D. Severe form of arterial hypertension,
- E. Manifested heart dilatation.

52. Appearance of T-wave in chest deflections with amplitude over 3 times more than initial value implies:

- A. Functional disorder in myocardial excitability,
- B. High physical capacity for work.
- C. Normal adaptation to physical load,
- D. Reduction of physical capacity for work of the examined person,
- E. Myocardial hypoxia.

53. Average level of physical capacity for work in healthy untrained women characterizes the ability to do the work with force:

- A. 2.7 Wt/kg,
- B. 1.7 Wt/kg,
- C. 1.0 Wt/kg,
- D. 0.5 Wt/kg,
- E. 2.5 Wt/kg.

54. Functional sign of achieving tolerance threshold to physical loads is:

- A. Decrease of R-wave voltage in standard deflections over 50%,
- B. Increase of T-wave voltage in chest deflections 1.5 times,
- C. Shortening of PQ interval,
- D. Elevation of ST segment 0.1 mW above isoline,
- E. Shortening of intervals R-R.

55. While carrying out test Navakki time of carrying out each stair of load is:

- A. 1 minutes,
- B. 3 minutes,
- C. 5 minutes,
- D. 4 minutes,
- E. 2 minutes.

56. Clinical manifestations of reaching tolerance threshold to physical loads are all the following except for one:

- A. Palpitation,
- B. Highly expressed paleness of skin,
- C. Disorder in coordination of movements,
- D. Complaints of labored breathing,
- E. Dizziness, blackout.

57. While carrying out load test maximally accepted heart rate in sportsman is defined using the following formula:

- A. 200 minus age,
- B. 220 minus age.
- C. 170 minus age,
- D. 120 minus age,
- E. 270 minus age.

58. Indications for carrying out load testing in clinic are all the following except for one:

- A. Elaboration of motion regime,
- B. Uncovering hidden and latent forms of diseases,
- C. Elaboration of physical development data,
- D. Drawing up individual programs of physical rehabilitation,
- E. Estimation of effectiveness of rehabilitation treatment course.

59. In case of manifestation of one from signs of threshold tolerance load testing must be:

- A. Immediately stopped,
- B. Stopped after carrying out that level of load,

- C. A break for rest must be made,
- D. Continued,
- E. Stopped in case of at least one more sign.

60. ECG criterion of stopping the test with physical load is:

- A. Decrease of T-wave voltage over 25% of initial value,
- B. Heart rate increase up to 160 beats/minute,
- C. Elevation of ST segment 0.1 mW above isoline,
- D. Reduction of R-wave voltage in standard deflections by 25%,
- E. Shortening of PQ interval.

61. Heart rate restoration time after a test with 20 squats for 30 seconds normally should be (in minutes):

- A. 3,
- B. 1,
- C. 2,
- D. 0.5,
- E. 5.

Answers to tests on the topic

«Investigation and an estimation of functional condition of an organism.

The medical conclusion»

Test	Answers	Test	Answers	Test	Answers	Test	Answers
1	E	21	D	41	E	61	A
2	B	22	A	42	D		
3	A	23	C	43	C		
4	B	24	A	44	B		
5	A	25	D	45	A		
6	A	26	B	46	E		
7	A	27	E	47	A		
8	D	28	B	48	B		
9	A	29	A	49	D		
10	C	30	A	50	A		
11	E	31	A	51	E		
12	A	32	C	52	E		
13	A	33	A	53	B		
14	C	34	C	54	E		
15	C	35	E	55	C		
16	A	36	D	56	A		
17	E	37	A	57	C		
18	E	38	D	58	D		
19	A	39	E	59	C		
20	B	40	A	60	B		

TESTS TO TOPIC

«Prepathological and pathological conditions at person who train irrationally.

The doping in sport. The medical and pedagogical control»

1. Since what age can children go in for figure skating:

- A. 14-15 years,
- B. 10-12 years,
- C. 12-14 years,
- D. 7-8 years,
- E. 8-10 years.

2. For how long can students who suffered from pneumonia be exempted from attending physical education lessons:

- A. 1-2 months,
- B. 2-4 weeks,
- C. 1-2 weeks,
- D. 8-12 months,
- E. 2-8 months.

3. Main part of sports medicine is medical inspection with the following purposes:

- A. Medical provision of high sports achievements, health-improving physical exercises, as well as organization and carrying out renewed medical measures,
- B. Decrease of sports masterfulness under maximal and over maximal loads,
- C. Decrease of sportsmen's rehabilitation,
- D. Determination of health level and health condition,
- E. Carrying out renewed sportsmen's treatment.

4. Medical biological provision and clinical examination of people who go in for physical exercises and sports is carried out the following way:

A. Mean age and elderly people who go in for physical exercises can be examined in medical-sports prophylactic centers,

B. Students of secondary schools, students of higher educational establishments, who study by state programs of physical development are examined 3 times a year by medical institutions attached to these establishments,

C. Preschool children are examined by doctors of polyclinics,

D. Pre-school children must be examined in city hospitals,

E. Mean age and elderly people who go in for sports can undergo medical examination in rehabilitation departments.

5. Medical exercises dispensary is:

A. Medical establishment,

B. Sanitary-cultural establishment,

C. Room for functional diagnosis,

D. Medical-prophylactic establishment,

E. Massage and physiotherapy room.

6. In sports medicine there are the main following directions:

A. Doctor's observation over those who go in for sports,

B. Sports cardiology,

C. Increase of medical personnel qualification concerning sports medicine issues,

D. Doctor's consultation concerning physical exercises and sports,

E. Sports gynecology.

7. The task of the initial medical examination:

- A. Measurement of anthropometric frames,
- B. Estimation of physical development of the body,
- C. Estimation of lung vital capacity,
- D. Estimation of physical condition of the body,
- E. Disease intelligence at early stages.

8. What are the normal curvature changes in sagittal plane of spinal column:

- A. Kyphosis and lordosis,
- B. Chest kyphosis and lordosis,
- C. Scoliosis and kyphosis,
- D. Kyphosis and lordosis-scoliosis,
- E. Scoliosis and lordosis.

9. What can be estimated with the help of somatoscopy:

- A. Skin, development of muscles, condition of foot arch,
- B. Form of foot and foot arch,
- C. Skin, subcutaneous fat, muscular development, form of chest, back, legs, fault in posture,
- D. Skin, thickness of subcutaneous fat, development of muscles,
- E. Form of chest and back.

10. Level of foot flattening can be quantitatively determined using the method developed by:

- A. Chizhin,
- B. Obratsov-Stragesko.
- C. Bloomberg,
- D. Mikulich,

E. Podyampolskaya.

11. A “very high” sign of physical development ranges:

- A. $< - 2.0$ p.,
- B. $+1.0 \dots +2.0$ p.,
- C. $0 - 0.5$ p.,
- D. >2.0 p.,
- E. -1.0 p to $- 2.0$ p.

12. What indices are recommended for fast but approximate estimation of physical development:

- A. Index of Kettle, knit-mass index, vital index, index of Erisman, strength index, index of Ruffe,
- B. Index of Kettle, knit-mass index, index of Ruffe,
- C. Vital index and strength index,
- D. Index of Erisman,
- E. Strength index, index of Ruffe, index of Kettle.

13. What is calculated while carrying out test of Ruffe?

- A. Mitochondrial respiration,
- B. Heart rhythm.
- C. Respiratory rate,
- D. Velocity of gas perfusion,
- E. Pulse rate.

14. Types of medical groups:

- A. Main,
- B. Additional,
- C. Special,

- D. Qualitative,
- E. Quantitative.

15. Index of Rufye – Dickson is considered good:

- A. From 2 to 3,
- B. From 3 to 5.
- C. From 5.9 to 7.0,
- D. From 3 to 5.9,
- E. From 4 to 5.8.

16. Due to test Martine-Kushelevskiy with 20 squats for 30 seconds pulse increased from 72 to 96 beats per minute, arterial pressure - from 120/70 to 130/80 mm Hg, restoration of indices took place within 2 minutes. Such reaction should be considered:

- A. Hypertensive,
- B. Dystonic.
- C. Hypotonic,
- D. Normotonic,
- E. Stage.

17. If in case of orthostatic sign pulse changed from 62 to 98 per minute, such reaction of vegetative nervous system should be considered:

- A. Increased,
- B. Normal,
- C. Decreased,
- D. Inadequate.

18. If in case of clinostatic test pulse changed from 82 to 64 per minute, such reaction of vegetative nervous system should be considered:

- A. Normal,
- B. Increased,
- C. Decreased,
- D. Inadequate.

19. After which minimal period after recovering from scarlet fever can one take part in competitions?

- A. 1.5 month,
- B. 3 weeks,
- C. 1 week,
- D. 1 months,
- E. 3 months.

20. After which minimal period after recovering from measles can one take part in competitions?

- A. 1.5 month,
- B. 3 weeks,
- C. 1 week,
- D. 1 months,
- E. 3 months.

21. After which minimal period after recovering from epidemic conjunctivitis can one take part in competitions?

- A. 1 month,
- B. 3 weeks,
- C. 1 week,
- D. 1.5 months,
- E. 3 months.

22. After which minimal period after recovering from acute purulent perforative otitis can one take part in competitions?

- A. 1.5 month,
- B. 3 weeks,
- C. 1 week,
- D. 1 months,
- E. 2 months.

23. After which minimal period after recovering from scarlet fever can one take part in competitions?

- A. 1 month,
- B. 3 weeks,
- C. 1 week,
- D. 1.5 months,
- E. 3 months.

24. After which minimal period after recovering from rheumatism can one take part in competitions?

- A. 1 year,
- B. 3 years,
- C. 2 years,
- D. 5 years,
- E. 10 years.

25. After which minimal period after operation of varicocele can one take part in competitions?

- A. 1 year,
- B. 3 years,

- C. 1 month,
- D. 1.5 years,
- E. 3 months.

26. After which minimal period after recovering from acute viral respiratory infection can one take part in competitions?

- A. 1 week,
- B. 3 weeks,
- C. 1 month,
- D. 1.5 months,
- E. 3 months.

27. Insufficiently trained people are typical:

- A. Breath holding time at inhaling ranges between 80-120 seconds,
- B. Less than normal pulse reduction after clinostatic test which testifies to the decreased reactivity in parasympathetic vegetative nervous system,
- C. Breath holding time at inhaling ranges between 60-70 seconds,
- D. Breath holding time at inhaling ranges between 70-80 seconds,
- E. More than normal pulse reduction after clinostatic test which testifies to the increased reactivity in parasympathetic vegetative nervous system.

28. The reasons of sudden death of sportsmen are:

- A. Abnormalities of physical development,
- B. Incorrect methodology of medical-pedagogical observations,
- C. Overloads,
- D. Sportsmen's diseases unrecognized and underestimated by a doctor,
- E. Training and competitions while being ill.

29. The following people are referred to the preparatory medical group:

A. People with insufficient physical development without deviations in health conditions,

B. People who have constant or temporary deviations in health condition, who need significant limitation of exercise stress,

C. People who have significant deviations in health conditions in case of sufficient physical development,

D. The healthy,

E. People with neurological diseases.

30. Age brackets for children who want to go in for sports in special groups:

A. Basketball, wrestling, volleyball - 12-14 years,

B. Acrobatics, artistic gymnastics - 8-9 years,

C. Rhythmic gymnastics, tombstoning, figure skating, swimming - 7-8 years,

D. Track and field - 12-14 years,

E. Weight lifting - 10-12 years.

31. Causes of pathological conditions and diseases in sportsmen not connected with sports include all except for one:

A. Chronic athletic overexertion,

B. Supercooling,

C. Presence of centers of chronic infection,

D. Superheating,

E. Presence of hidden and latent pathology.

32. Most frequent causes of a sudden death while doing physical exercises are:

A. Insufficient restoration after trainings,

- B. Incorrect methodology of medical-pedagogical observations,
- C. Injuries of support-motor apparatus,
- D. Defects of physical development, weakness of muscles,
- E. Unrecognized and underestimated diseases by doctors before exercises.

33. Hepatic pain syndrome in sportsmen is:

- A. A physiological condition,
- B. A pathological condition,
- C. Occurs only in sportsmen who had suffered from viral hepatitis,
- D. Occurs only in teenage sportsmen,
- E. Occurs only in sportsmen who infringe dietary habits.

34. Acute physical overstrain refers to all of the following conditions except for one:

- A. Violation of myocardial repolarization,
- B. Spasm of brain vessels,
- C. Myoglobinuria,
- D. Orthostatic collapse,
- E. Disseminated intravascular coagulation syndrome.

35. Doping agents include all of the following medical groups except for one:

- A. Anabolic steroids,
- B. Diuretics,
- C. Adaptogens,
- D. Beta blockers,
- E. Stimulators.

36. "Border" conditions in practice of sports medicine include all of the following conditions except for one:

- A. Vegeto-vascular dystonia,
- B. Pre-hypertensive conditions,
- C. Osteopenia and osteoporosis,
- D. Cardiac defects,
- E. Disbacteriosis of bowels.

37. Main elements of electrocardiogram which imply chronic heart overstrain at physical loads:

- A. Q-wave and segment PQ,
- B. P-wave and segment PQ,
- C. Intervals R-R,
- D. R-wave, T-wave and segment ST,
- E. S-wave and segment ST.

38. Physiological phenomenon after doing physical exercises are:

- A. Short-term decrease of physical capacity for work,
- B. Disorders in coordination of movements,
- C. Overstrain,
- D. Chronic physical overstrain,
- E. Retrograde amnesia.

39. Acute circulatory collapse at physical overstrain can be manifested as all the following conditions except for one:

- A. Gravitational shock,
- B. Syncope,
- C. Dizziness,

- D. Orthostatic collapse,
- E. Pulse pressure increase by 80%.

40. In case of sportsman's complaints of heart pain first of all which procedure must be carried out:

- A. Electrocardiography,
- B. Polycardiography.
- C. Echocardiography,
- D. Reovasography,
- E. Phonocardiography.

41. Causes of pre-pathological conditions and diseases in athletes and sportsmen connected with doing physical exercises are all of the following except for one:

- A. Presence of centers of chronic infection,
- B. Inconformity of physical load to functional abilities of a body.
- C. Insufficient use of recovery means after trainings,
- D. Disregarding for medical recommendations,
- E. Unfavorable sanitary hygienic conditions of places of trainings and competitions.

42. "Border" conditions in practice of sports medicine are all of the following except for one:

- A. Pre-hypertensive conditions ,
- B. Weak physical development,
- C. Bronchial asthma of physical effort,
- D. Dysplisias of connective tissue,
- E. Deficit of vitamins and macro elements.

43. Physiological phenomena after doing physical exercises are:

- A. Acute physical overexertion,
- B. Overstrain.
- C. Disorders in coordination of movements,
- D. Chronic physical overstrain,
- E. Overexertion.

44. Doping means include the following medical group:

- A. Adaptogenes,
- B. Vitamins,
- C. Diuretics,
- D. Microelements,
- E. Hepatoprotectors.

45. Causes of diseases while doing physical exercises due to the sportsman's guilt are all of the following except for one:

- A. Combination of trainings with intensive work or study,
- B. Disorders in training and rest regimes,
- C. Pernicious habits (smoking, using alcohol),
- D. Dissimulation (hiding complaints) of symptoms of the disease by a sportsman,
- E. Doing excessive physical loads.

46. Chronic physical overstrain includes all of the following except for one:

- A. Spontaneous pneumothorax,
- B. Myofibrosis,
- C. Arthrosis-arthritis,
- D. Disorder in myocardial repolarization,
- E. Fatigue fractures.

47. Hepatic pain syndrome in sportsmen is:

- A. A pathological condition,
- B. A physiological condition,
- C. Occurs only in sportsmen who had suffered from viral hepatitis,
- D. Occurs only in teenage sportsmen,
- E. Occurs only in sportsmen who infringe dietary habits.

48. Normal proteinuria after intensive physical load must take place not later than in:

- A. Up to 6 hours,
- B. 6-12 hours,
- C. 13-23 hours,
- D. 24-48 hours,
- E. 49-72 hours.

49. Most often acute cardiomyopathy occurs in sportsmen who train mainly:

- A. Speed-strength qualities,
- B. Strength,
- C. Stamina,
- D. Coordination,
- E. Dexterity.

50. Hypertensive conditions in sportsmen most often happen:

- A. In case of static physical loads,
- B. In case of dynamic physical loads,
- C. In case of stamina physical loads,
- D. Never happen,
- E. They are independent of physical loads.

Answers to tests on the topic

«Prepathological and pathological conditions at person who train irrationally.

The doping in sport.

The medical and pedagogical control»

Test	Answers	Test	Answers	Test	Answers
1	D	21	C	41	A
2	C	22	A	42	C
3	A	23	A	43	E
4	B	24	C	44	C
5	D	25	E	45	A
6	A	26	A	46	A
7	B	27	B	47	A
8	A	28	D	48	A
9	C	29	A	49	C
10	C	30	C	50	A
11	D	31	A		
12	A	32	E		
13	C	33	B		
14	C	34	E		
15	C	35	C		
16	D	36	C		
17	B	37	E		
18	A	38	A		
19	E	39	A		
20	D	40	A		

TESTS TO TOPIC

«The general bases of physical rehabilitation.

The physical rehabilitation at internal diseases clinic»

1. Physical rehabilitation is a complex of measures aimed at restoring person's health and capacity for work:

- A. By means of medical and physical therapies,
- B. By means of physical culture and other physical factors,
- C. By means and methods of physiotherapy,
- D. By means of balneotherapy and physiotherapy,
- E. By means of physical education and sports.

2. Exercise therapy as a method of physical rehabilitation is:

- A. Active, functional, non-specific, pathogenetic, training therapy,
- B. Active, biomechanical, neurohumoral specific therapy,
- C. Passive, preventive, non-specific, training therapy,
- D. Passive, symptomatic, specific, biomechanical therapy,
- E. Passive, symptomatic, specific, training therapy.

3. Contradictions for exercise therapy are:

- A. Stable angina pectoris,
- B. Single extrasystoles,
- C. Insufficiency of blood circulation I degree,
- D. Arterial hypotension 90/50 mm Hg,
- E. Arterial hypertension 220/120 mm Hg.

4. Modes of motion activity on the hospital stage of rehabilitation:

- A. Strict bed, extended bed, ward, free,
- B. Stabilizing, supporting,

- C. Sparing, sparing-training, training,
- D. Bed, ward, sparing,
- E. Bed, semi-bed, sparing, general.

5. Prescription of exercise therapy and control over its carrying out is made by:

- A. Doctor specialized in exercise therapy,
- B. Ward doctor,
- C. Medical nurse,
- D. Head of the department,
- E. Methodologist of exercise therapy.

6. Main mechanisms of physiological activity of exercise therapy on the body:

- A. General tonic, symptomatical, adaptive,
- B. Symptomatical, stimulating, pathogenetical,
- C. General invigorative, psychological, training,
- D. General tonic, trophic, compensatory-adaptive, recovery,
- E. Specific, Symptomatical, mental-physical.

7. Means of exercise therapy are:

- A. Physical exercises, motion regime, natural environmental factors, massage, mechanical therapy,
- B. Walking, running, jumping swimming, applies exercises,
- C. Gymnastics, sports-applied, playing, special exercises,
- D. Movement therapy, morning hygienic gymnastics, massage,
- E. Natural environmental factors, massage, mechanical therapy, physiotherapy.

8. Independent tasks appointed by a doctor are performed by patient for:

- A. Increasing mental-physical tone of body,
- B. Stimulating activity of all functional systems,
- C. Stimulating and restoration of functions of the injured organ or system,
- D. General strengthening actions,
- E. General tonic and specific action.

9. Main forms of exercise therapy are:

- A. Morning hygienic gymnastics, medical gymnastics, patient's independent tasks appointed by a doctor, health-improving forms of physical education,
- B. Individual, group, small-group,
- C. Physical exercises, conditioning to the cold, walks, massage,
- D. Physical exercises, motion regime, mechanic therapy, massage,
- E. Morning hygienic gymnastics, applied exercises, elements of sports.

10. Which exercises make up morning hygienic gymnastics?

- A. General strengthening and respiratory,
- B. Dynamic, isotonic, ideomotor,
- C. Gymnastic, plastic, running,
- D. Special and respiratory,
- E. Dynamic and respiratory.

11. The principles of physical therapy method are all of the following except for one:

- A. Staging,
- B. Individuality,
- C. Late start,
- D. Continuity and succession,

E. Control over effectiveness.

12. Physical exercises as a main way of exercise therapy are:

- A. Aimed strictly measured movements,
- B. Muscle contractions with different physical loads.
- C. Voluntary movements by different parts of the body,
- D. Motor activity on special simulators,
- E. Muscle tension with different physical loads.

13. Medical gymnastics is aimed at:

- A. Recovery of the damaged system or organ,
- B. Stimulation of respiratory system function,
- C. Stimulation of activity in the whole body,
- D. Stimulation of a cardiovascular system,
- E. Stimulation of the whole body and recovery of the damaged system or organ.

14. Main form of exercise therapy – movement therapy - includes the following exercises:

- A. General strengthening, respiratory, special,
- B. Isometric, isotonic, aerobic,
- C. With objects, gymnastic apparatuses, on simulators,
- D. For development of strength, speed, dexterity, stamina,
- E. Static, dynamic, special.

15. Contradictions to exercise therapy prescription are:

- A. Syndrome WPW,
- B. Insufficiency of blood circulation II-A stage,
- C. Stable angina pectoris,

- D. Sinus tachycardia,
- E. Moderate hypertensive disease.

16. Independent tasks appointed by a doctor as a form of exercise therapy include exercises:

- A. Ideomotor ,
- B. General tonic,
- C. General strengthening and respiratory,
- D. Special,
- E. Respiratory.

17. Methodological principles of exercise therapy are all of the following except for one:

- A. Variety and novelty,
- B. Gradualness,
- C. Regularity and duration,
- D. Strictly measured and moderation of loads,
- E. Individuality.

18. Which regime of motor activity is not used on the health resort treatment stage of rehabilitation:

- A. Free,
- B. Sparing-training,
- C. Sparing,
- D. Training,
- E. Intensive training.

19. Movement therapy is done:

- A. 1-2 times a day,

- B. 3-4 times a day,
- C. 5-6 times a day,
- D. Every 1-2 hours,
- E. 2 times a week.

20. With what purpose are means of physical rehabilitation used?

- A. For increasing physical capacity for work,
- B. For faster patient's health recovery and capacity for work,
- C. For strengthening health and increasing sportsmanship,
- D. For treating diseases,
- E. For better feeling.

21. Class of myocardial infarction severity at the hospital stage of rehabilitation depends on:

- A. Depth and extensiveness of damage, complications, coronary insufficiency,
- B. Depth and extensiveness of damage, age of the patient, coronary insufficiency,
- C. Depth and extensiveness of damage, concomitant disease, age of a patient,
- D. Complications of coronary insufficiency, age of a patient, concomitant diseases,
- E. Subjective condition of a patient.

22. Patient I., 56 years old, arrived at a cardiologic department of a hospital with diagnosis coronary artery disease, acute not Q myocardial infarction of left ventricle. During examination I class of severity was diagnosed and 3-week program of rehabilitation was prescribed. When is the turn to the side prescribed?

- A. On the first day,

- B. On the first-second day,
- C. On the third day,
- D. Individually,
- E. On the second-third day.

23. Patient B., 49 years old, arrived at a cardiological department of a hospital with diagnosis Q myocardial infarction of the left ventricle wall. During examination third class of myocardial infarction was diagnosed and a 5-week rehabilitation program was prescribed. When is the patient advised to go outdoors for measured walking route?

- A. On the 22-26 day,
- B. On the 26-28 day,
- C. On the 14-15 day,
- D. Individually,
- E. On the 15-22 day.

24. Main special exercises for patients with essential arterial hypotension:

- A. Static exercises, exercises with elements of spring,
- B. Speed-force exercises and exercises with a slight load (dumbbells),
- C. Exercises for relaxation of muscular groups and holding breath at exhaling,
- D. All the mentioned above answers are correct,
- E. There are wrong answers.

25. Contradictions for prescribing exercise therapy are all of the following conditions except for one:

- A. Single extrasystoles,
- B. Sinus bradycardia less than 50 beats/minute,
- C. Sinus tachycardia more than 100 beats/minute,

D. Intensification of blood circulation insufficiency.

26. Patient S., 51 years old, arrived at a cardiological department of a hospital with diagnosis coronary artery disease, acute Q myocardial infarction of left ventricle wall. During examination III severity class was diagnosed and a 5-week rehabilitation program was prescribed. When is the patient allowed to sit in bed?

- A. Individually,
- B. On the 7-8th day,
- C. On the 8-10th day,
- D. On the 3rd day,
- E. On the 5-7th day.

27. In case of bed rest with myocardial infarction movement therapy is aimed at:

- A. Improving coronary and perforate blood circulation, stimulation of metabolism,
- B. Training in going up the stairs,
- C. Increasing tolerance of a body to physical loads,
- D. Classes with health path (Terrainkur),
- E. Increasing level of physical condition of a patient.

28. Contradictions for prescribing movement therapy in case of hypertensive disease are arterial pressure not more than:

- A. 210/110 mm Hg,
- B. 200/100 mm Hg,
- C. 210/120 mm Hg,
- D. 180/100 mm Hg,
- E. 210/95 mm Hg.

29. Main special exercises in case of hypertensive disease are:

A. Cyclic movements at a slow and moderate pace, exercises for relaxation, balance, respiratory exercises with delay at exhaling,

B. Acyclic movements at a fast pace, exercises with burdening, respiratory exercises with delays at inhaling,

C. Cyclic movements at a fast pace, exercises for relaxation, respiratory exercises with delays at inhaling, exercises for balancing,

D. Cyclic movements at a slow and moderate pace, exercises with long-term static effort, exercises for balancing,

E. Exercises with static loads, tonic respiratory exercises, exercises with elements of sports games.

30. Contradictions for prescribing exercise therapy are all of the following conditions except for one:

A. Stable angina pectoris,

B. Negative dynamics on ECG.

C. Insufficiency of blood circulation IIB-III stages,

D. Pre-infarction condition, acute myocardial infarction,

E. Clot-embolic complications.

31. Main tasks of exercise therapy for a patient with coronary artery disease are:

A. Improvement of coronary and peripheral blood circulation, decrease of oxygen need for myocardium,

B. Increase of tolerance to physical loads,

C. Restoration of a normal breath stereotype,

D. All the mentioned above answers are correct,

E. There are wrong answers.

32. Periods of exercise therapy in clinic of cardiovascular diseases at a hospital stage of treatment:

- A. Bed, ward, free,
- B. Stabilizing, supporting,
- C. Preparatory, period of recovery, supporting,
- D. Sparing, sparing-training, training,
- E. Introductory, main, conclusive.

33. Features of respiratory exercises for patients with hypertensive disease are:

- A. Respiratory exercises with holding breath at exhaling,
- B. Forced breathing,
- C. Respiratory exercises with holding breath at inhaling,
- D. Sound gymnastics,
- E. Dynamical respiratory exercises with frequent shallow breathing.

34. How many classes of severity are there for patients with myocardial infarction?

- A. 5,
- B. 2.
- C. 3,
- D. 1,
- E. 4.

35. Most optimal forms of exercise therapy for patients with stable angina pectoris at hospital stage of treatment (free mode):

- A. Measured walking on the flat area at a slow or moderate pace, training on simulators, massage,

- B. Measured running on the flat area at a fast pace,
- C. Movement therapy procedure with static and speed-strength exercises,
- D. Morning and hygienic gymnastics, movement therapy with exercises for relaxation,
- E. Sports games, riding a bicycle, conditioning to the cold water procedures.

36. Patient I., 49 years old, arrived at a cardiological department of a hospital with diagnosis coronary artery disease, acute Q myocardial infarction of left ventricle wall. During examination III severity class was diagnosed and a 5-week rehabilitation program was prescribed. Which physical rehabilitation program should be prescribed?

- A. 4-week,
- B. 2-week,
- C. 3-week,
- D. 5-week,
- E. Individual.

37. Duration of medical physical therapy of extended bed-rest regime in case of myocardial infarction should be:

- A. 5-10 minutes,
- B. 10-15 minutes,
- C. 20-30 minutes,
- D. 30-50 minutes,
- E. До 60 minutes.

38. Main tasks of exercise therapy in case of a patient's rehabilitation with myocardial infarction at strict bed-rest motor mode:

A. Prevention of complications, improvement of peripheral blood circulation, stimulation of extra-cordial factors of blood circulation and metabolism on myocardium,

B. Stimulation of extra-cordial factors of blood circulation, intensification of reparative processes in myocardium, gradual extension of motor activity volume,

C. Development of compensatory abilities of a cardiovascular system, secondary prophylaxis of coronary artery disease complications,

D. Improvement of peripheral blood circulation, increase of adaptation to growing physical loads,

E. Intensification of reparative processes in myocardium, gradual extension of motor activity, increase of adaptation to growing everyday loads.

39. Patient S., 51 years old, arrived at a cardiological department of a hospital with diagnosis coronary artery disease, acute Q myocardial infarction of left ventricle (front and side wall). During examination III severity class was diagnosed and a 5-week rehabilitation program was prescribed. When should the patient be recommended to walk in the corridor?

A. On the 10-18th day,

B. On the 18-20th day,

C. On the 8-10th day,

D. On the 22-24th day,

E. Individually.

40. Main training measure at ward rest in case of coronary artery disease is:

A. Slow walking in the ward,

B. Movement therapy in the lying position,

C. Movement therapy in the room of exercise therapy,

D. Exercises on simulators,

E. Respiratory gymnastics.

41. A patient with bronchial asthma in case of approaching attack should:

- A. Carry out a forced exhale, stretching muscles,
- B. Relax muscles and carry out a brief shallow inhale using a nose and long exhale using a mouth,
- C. Increase inhale and exhale volume simultaneously with increase of breathing rate,
- D. To carry out dynamic respiratory exercises with intensification at inhaling,
- E. Exercise therapy is not recommended.

42. After the end of bronchospasm a patient should use:

- A. Sound gymnastics and drainage exercises,
- B. Deep breathing with pauses at inhaling and exhaling,
- C. Breathing with prolonged exhaling,
- D. Breathing with prolonged inhaling,
- E. Slow breathing without intentional control.

43. Main tasks of exercise therapy in case of pneumonia:

- A. To increase blood and lymph circulation in lungs for resorption of exudates, restore normal stereotype of breath, to accelerate disintoxication of a body,
- B. To prevent formation of pulmonary collapses and pleural unions, increase non-specific immunity of a body,
- C. To increase chest and diaphragm mobility, increase lung vital capacity, increase strength respiratory muscles, prevent development of pulmonary emphysema,
- D. All previous answers are correct,
- E. There are incorrect answers.

44. Special exercises in case of splanchnoptosis:

A. Exercises for strengthening abdominal muscles, pelvic floor in initial lying position on the tilted surface with increased leg end and in the knee-ulnar and knee-wrist positions,

B. Exercises for front abdominal wall, back, pelvic floor, exercises for relaxation, exercises for springing the body.

C. Exercises for training abdominal muscles, diaphragm, perineum, for relaxation,

D. Exercises for muscles of back, static from the initial standing and sitting positions,

E. Medical walking, терренкур, active games.

45. Medical physical culture at a pneumonia includes all of the following exercises except for one:

A. Exercises for upper and lower extremities,

B. Dynamical respiratory exercises with sound pronunciation,

C. Regulated forced often breathing with intensification at inhaling,

D. Respiratory exercises with prolonged exhaling via lips placed as a pipe, diaphragm breathing,

E. Exercises with bends and trunk movements.

46. Contradictions to exercise therapy at a gastric ulcer and duodenal ulcer are all of the following except for one:

A. Bowels paresis,

B. Repeated vomiting,

C. Increase of body temperature over 38.0 0C due to inflammatory phenomena in lungs,

D. Penetration, hemorrhage,

E. Expressed pain syndrome.

47. Special exercises at a gastric ulcer and duodenal ulcer on the 2-5th day after acute pain relief and without other clinical manifestations of the disease:

A. Static breathing exercises with intensification on lower chest and diaphragm breathing in the lying position on the back, exercises for relaxation,

B. Exercises for muscles of abdomen, diaphragm, perineum, exercises for relaxation, respiratory exercises with intensification on diaphragm exhaling, measured walking and other cyclic loads.

C. Exercises for strengthening abdominal, pelvic floor muscles, in the initial condition lying on the inclined surface with the lifted leg end in the knee-ular position,

D. Exercises for upper extremities with lifting them above shoulder level, lifting and moving straight legs, exercises for coordination of movements,

E. Exercises aimed at increasing intra-abdominal pressure, general strengthening exercises for all muscle groups at a fast pace.

48. Periods of exercise therapy in clinic of cardiovascular diseases at a hospital stage of treatment:

A. Bed, ward, free,

B. Stabilizing, supporting,

C. Preparatory, period of recovery, supporting,

D. Sparing, sparing-training, training,

E. Introductory, main, conclusive.

49. Contradictions for exercise therapy at a pleuritis are all of the following except for one:

A. Subfebrile temperature,

B. A large amount of exudates,

- C. Significant painfulness in a chest while doing physical exercises,
- D. Absence of pleural friction rub,
- E. Acute inflammatory process.

50. Features of special respiratory exercises at a pleuritis are:

- A. Regulated breathing with delay at inhaling with simultaneous inclination of a trunk to a healthy side,
- B. Regulated breathing with delay at inhaling and simultaneous inclination of a trunk to a damaged side.
- C. Regulated breathing with prolonged exhaling and pause at the exit,
- D. Forced breathing,
- E. Regulated breathing with pronunciation of sounds.

51. Determine the most optimal initial position for carrying out special exercises for a patient with biliary dyskinesia by a hypokinetic type:

- A. Lying on the left side, sitting, standing,
- B. Lying on the abdomen,
- C. Lying on the back,
- D. Lying on the back with a bit uplifted lower end of the bed,
- E. Lying on the back with a bit uplifted head end of the bed.

52. Special exercises in case of biliary diseases:

- A. General strengthening exercises, exercises for front abdominal wall, back, pelvic floor, exercises for relaxation, exercises with body shaking,
- B. Exercises for abdomen muscles with periodic increase and decrease of intra-abdominal pressure, for muscles of a trunk (bends, half-turns, turns).
- C. Hanging on wall bars, deep diaphragm breathing, exercises for relaxation, different types of walking,
- D. All the previous answers are correct,

E. There are incorrect answers.

53. With the purpose of preventing stagnant phenomenon in abdominal cavity the following is prescribed:

- A. Respiratory static and dynamic exercises,
- B. Exercises for straining abdominal muscles,
- C. Exercises for distal parts of extremities,
- D. General strengthening exercises,
- E. Reflective and ideomotor exercises.

54. For resolving the issue of possible extending motor activity:

- A. Medical pedagogical observation is carried out,
- B. Anthropometric examination is carried out,
- C. Pulse and other subjective data before and after exercise therapy are studied,
- D. Results of somatoscopy are taken into account,
- E. Standard functional tests or load tests are carried out.

55. Main reasons of exercise therapy in case of pulmonary tuberculosis are:

- A. Improvement of blood and lymph circulation in lungs, preventing formation of pleural unions, increase of lung vital capacity, disintoxication, improvement of interchange of gases,
- B. Elimination of bronchismus, prevention of pulmonary emphysema development, recovery of balance between sympathetic and parasympathetic parts of vegetative nervous system.
- C. Improvement of blood and lymph circulation in lungs, increase of exudates resorption, activization of diaphragm mobility, restoration of a normal type of breathing,

D. Increase of chest and diaphragm mobility, increase of strength in respiratory muscles, prevention of atelectasis and pleural unions,

E. Prevention of pulmonary emphysema, increase of strength in respiratory muscles, restoration of a normal breathing stereotype, improvement of interchange of gases.

56. What special exercises are prescribed at a pleuritis:

A. Exercises for strengthening abdominal press muscles,

B. Exercises with breath delay at exhaling with simultaneous extension, turn,

C. Trunk inclinations to the damaged side at exhaling,

D. Trunk inclinations to the healthy side at inhaling,

E. Exercises which prolong the exhale.

57. When a patient is diagnosed with prolonged asphyxia attack with intensifying ventilation insufficiency:

A. Exercises for muscles of shoulder girdle are prescribed,

B. Method of will limitation in volume of lung ventilation is prescribed,

C. Respiratory exercises with prolonged exhaling and pronunciation of sounds are prescribed,

D. Exercise therapy is not prescribed,

E. Drainage exercises are prescribed.

58. Contradictions for exercise therapy in case of biliary disease:

A. Acute manifestations of a disease, significant pain syndrome, frequent attacks of cholelithiasis,

B. Biliary dyskinesia,

C. Not complicated cholelithiasis,

D. Chronic cholecystitis by a hypotonic type,

E. Chronic hepatitis in remittance phase.

59. A girl of 9 years old with diagnosis acute right low-lobar pneumonia undergoes hospital treatment. Movement therapy is prescribed at a ward regime. How gymnastics should be carried out?

A. Small-group method, initial position lying, sitting, standing, pace of doing exercises is slow and moderate, duration of procedures 20-25 minutes, physical load is moderate,

B. Individually in the lying position and sitting, pace of doing exercises is slow, duration of procedure 12-15 minutes, physical load is low or below moderate.

C. Group method, initial position lying, sitting, pace of doing exercises is moderate, fast, duration of procedures 35-40 minutes, physical load is moderate and above moderate,

D. Small-group method, initial position lying, standing, pace of doing exercises is fast, duration of procedures 30-35 minutes, physical load is above moderate,

E. Group method using active games, all initial positions, duration 40-45 minutes, physical load is above average.

60. Which of the exercise therapy means are measured the best?

A. Action of natural factors,

B. Conditioning to the cold procedures,

C. Physical exercises,

D. Massage,

E. Walks.

61. Patient N., 46 years old undergoes treatment in medical sanatorium with diagnosis: chronic bronchitis with bronchus-spastic component in the stage of

remission. Diagnostic veloergometry was carried out. Threshold load was 90 W.

Which movement regime should be prescribed to the patient?

- A. Sparing,
- B. Sparing-training,
- C. Training,
- D. Intensive-training,
- E. Free.

62. Features of special respiratory exercises at pleuritis are not:

- A. Prophylaxis of pulmonary emphysema,
- B. Improvement of blood and lymph circulation in lungs and pleura and increase of lung vital capacity,
- C. Activization of chest and diaphragm mobility,
- D. Prophylaxis of atelectasis formation and pleural unions,
- E. Acceleration of exudates resorption.

63. Special exercises at gastric ulcer and duodenal on ward motor mode:

- A. Static breathing exercises with intensification on lower chest and diaphragm breathing in the lying position on the back, exercises for relaxation of all muscle groups,
- B. Exercises for all muscle groups and muscles of front abdominal wall with increasing effort,
- C. Exercises for strengthening abdominal, pelvic floor muscles, in the initial condition lying on the inclined surface with the lifted leg end in the knee-ulnar and knee-wrist position,
- D. Exercises for upper and lower extremities, exercises for coordination of movements, measured walking,
- E. Exercises aimed at increasing intra-abdominal pressure.

64. A boy, 13 years old, is ill with bronchial asthma, infection allergic genesis. What special exercises should be done after elimination of bronchus?

- A. Static and dynamic respiratory exercises,
- B. Drainage exercises, dynamic respiratory exercises with intensification at inhaling, general strengthening exercises, resolving exercises,
- C. Static respiratory exercises with pronunciation of whistling, buzzing sounds at prolonged inhaling, exercises for relaxation of chest muscles,
- D. Drainage exercises, postural drainage, general strengthening exercises,
- E. Dynamic respiratory exercises, drainage exercises, static respiratory exercises with pronunciation of sounds at exhaling.

65. Contradictions for exercise therapy are:

- A. Arterial blood pressure 100/60 mm Hg,
- B. Increase of erythrocyte sedimentation rate up to 15 mm/hour.
- C. Sinus tachycardia 95 beats/minute,
- D. Bradycardia with heart rate 45 beats/minute,
- E. Insufficiency of blood circulation of I stage.

66. Tasks of medical physical culture at bronchial asthma are:

- A. To eliminate bronchospasm, restore normal stereotype of breathing, assist balance formation between sympathetic and parasympathetic parts of vegetative nervous system,
- B. To increase chest, diaphragm morbidity, prevent development of pulmonary emphysema, increase strength of respiratory muscles,
- C. To counteract formation of pulmonary collapse and pleural unions, accelerate infiltrate resorption, quicken disintoxication of a body,
- D. All the previous answers are correct,
- E. There are incorrect answers.

67. Contradictions for movement therapy in case of pneumonia are all of the following conditions except for one:

- A. Respiratory failure 3 stage,
- B. Significant intoxication,
- C. Temperature of body above 38 0C,
- D. Erythrocyte sedimentation rate up to 15 mm/hour,
- E. Tachycardia more than 100 beats per minute.

68. Most optimal initial positions for movement therapy in case of splanchnoptosis:

- A. Standing and sitting,
- B. Sitting, putting a head on hands, leaning against the table,
- C. Lying on the back on the inclined surface with a bit lifted leg end, knee-ulnar, knee-wrist,
- D. Lying on the back, on the left and right sides,
- E. Lying on the abdomen, on the inclined surface with lowered leg end, knee-ulnar, knee-wrist.

69. With the purpose of prophylaxis of stagnant phenomena in abdominal cavity doctors prescribe:

- A. Exercises for distal ends of extremities,
- B. Exercises for straining abdominal muscles,
- C. Respiratory static and dynamic exercises,
- D. General strengthening exercises,
- E. Reflective and ideomotor exercises.

70. Which exercises should be eliminated from movement therapy in case of biliary dyskinesia:

- A. Exercises for abdominal muscles with periodic increase and decrease of intra-abdominal pressure for trunk muscles (bends, turns, rotations),
- B. Swing movements, exercises with sports apparatuses,
- C. Exercises for relaxation,
- D. Exercises with major static tension, especially of the front abdominal wall,
- E. Deep diaphragm breathing.

Answers to tests on the topic

«The general bases of physical rehabilitation.

The physical rehabilitation at internal diseases clinic»

Test	Answers	Test	Answers	Test	Answers	Test	Answers
1	B	21	C	41	B	61	D
2	A	22	B	42	C	62	C
3	E	23	D	43	D	63	B
4	A	24	B	44	A	64	E
5	A	25	A	45	C	65	A
6	D	26	E	46	C	66	A
7	A	27	A	47	A	67	D
8	C	28	B	48	D	68	C
9	A	29	A	49	D	69	A
10	A	30	A	50	E	70	A
11	A	31	B	51	E		
12	B	32	D	52	A		
13	A	33	A	53	C		
14	B	34	C	54	E		
15	C	35	D	55	A		
16	E	36	D	56	C		
17	A	37	A	57	D		
18	C	38	A	58	A		
19	A	39	B	59	B		
20	B	40	B	60	C		

TESTS TO TOPIC

«Physical rehabilitation at surgical, traumatologic and orthopaedic practice.

Physical rehabilitation at neurology clinic»

1. Contradictions for exercise therapy in abdominal surgery are:

- A. Heavy condition of a patient, hemorrhage risk,
- B. Atony of urinary bladder,
- C. Increase of body temperature up to 37.50 °C,
- D. Bowels paresis,
- E. Insignificant pain syndrome.

2. Which of the mentioned methods of examination allow doctors to define backbone mobility, strength and stamina of muscles of the back and abdominal press in case of scoliotic disease?

- A. Clonistatic test, holding legs in the initial position on the back under 900 for 3 minutes,
- B. Wrist dynamometry, back strength,
- C. Test of Genchi, back strength, orthostatic sign,
- D. Test of Shtange, back strength,
- E. Bends of the trunk touching floor with palms, back strength, holding legs in the initial position on the back under 450 for 1.5-2 minutes.

3. Contradictions for prescribing exercise therapy in traumatology are all of the following except for one:

- A. Increase of erythrocyte sedimentation rate up to 20 mm/hour,
- B. Presence of the manifested pain syndrome.
- C. Threat of repeated hemorrhages, acute respiratory processes,
- D. Increase of body temperature over 38.0 0C, severe condition of a patient,

E. Presence of foreign bodies near major vessels and nerve trunks.

4. Main tasks of exercise therapy in the first (immobilizing period) at bone fractures:

A. Stimulation of central nervous system, prophylaxis of stagnant phenomena in lungs and pelvis minor,

B. Prophylaxis of muscle atrophy and reduction of mobility in free and immobilized joints.

C. Elimination of residual abnormalities and contracture, muscle weakness,

D. All answers are correct,

E. There are incorrect answers.

5. When do prescribe the physical therapy at patient with spinal column compression fracture?:

A. Since 3-5 days in the absence of contraindications,

B. In 2-2,5 weeks after a trauma.

C. In 10-14 days after a trauma,

D. Physical therapy is counterindicated,

E. In the end of 1 month after a trauma in the absence of contraindications.

6. Motor modes in the clinic at surgical diseases at the sanatorium-resort stage of treatment:

A. Bed, ward, free,

B. Stabilizing, supporting,

C. Preparatory, period of recovery, supporting,

D. Sparing, soaring-training, training,

E. Introductory, main, conclusive.

7. Tasks of exercise therapy in the second (post-immobilizing) period at fractures include all of the following except for one:

- A. Adaptation to physical everyday and industrial loads,
- B. Restoration of lost or damaged functions.
- C. Liquidation of late complications (contractures, reduction of motor function in joints and others),
- D. Restoration of movement volume, strengthening of atrophied muscular groups,
- E. Fostering fast completion of regenerative processes.

8. Patient, 25 years old, is in a traumatological department with a fracture of a right collarbone. Reposition of fragments was carried out, fixating bandage was applied. On what day in complex recovery exercise therapy may be prescribed?

- A. 1-2 day,
- B. 2-3 day.
- C. 3-4 day,
- D. 4-5 day,
- E. 5-6 day.

9. What special exercises are carried out at flat-footedness in order to achieve the correctness of foot deformation?

- A. Exercises for breathing, exercises for stretching,
- B. Responsive exercises, exercises for breathing,
- C. Special types of walks, correcting exercises for a foot and stepping, general strengthening exercises,
- D. Ideomotor exercises, general strengthening exercises,
- E. Exercises with subjects, general strengthening exercises.

10. Movement therapy as a main form of exercise therapy consists of exercises:

- A. General strengthening, respiratory, special,
- B. Isometric, isotonic, ideomotor.
- C. With a subject, on sports apparatuses, on simulators,
- D. For strength, speed, dexterity development,
- E. Stamina and coordination of movement development.

11. With the purpose of preventing development of stagnant phenomena in abdominal cavity doctors prescribe:

- A. Respiratory exercises: static, dynamic,
- B. Exercises for abdominal muscle tension,
- C. Exercises for distal parts of extremities,
- D. General strengthening exercises,
- E. Reflex and ideomotor exercises.

12. Second period of exercise therapy at cylindrical bone fractures starts:

- A. In case of bedsores,
- B. After restoration of anatomical integrity of damaged bones,
- C. When contractures, muscular atrophy, muscular weakness appear,
- D. After applying a circular plaster bandage,
- E. While forming decrease of mobility in free of immobilization joints.

13. Patient, 39 years old, undergoes treatment in a traumatological department with compression fracture of the 1st lumbar vertebra for 1 month. What period should be prescribed to the patient if while examining he lifts legs to the angle 45° without discomfort and pain in the damaged part of the backbone?

- A. 1 period,
- B. 2 period,

- C. 3 period,
- D. 4 period,
- E. 5 period.

14. Main special exercises which are used during compression fracture of spinal column in the first period:

- A. Respiratory exercises, general strengthening exercises for small and moderate muscular groups in eased conditions,
- B. Respiratory gymnastics, massage,
- C. Exercises for stretching, exercises for balance,
- D. Active leg movements with lifting them above the bed, respiratory exercises,
- E. Passive actions of upper and lower extremities.

15. Within first hours after thoracic operations respiratory exercises are recommended:

- A. Reflex exercises,
- B. Dynamic, respiratory exercises,
- C. General strengthening exercises,
- D. Passive exercises for lower extremities,
- E. Static, diaphragm breathing.

16. Patient, 39 years old, is in a thoracic department after operation due to lung tubercle, postoperative complications are not revealed. Which motor regime should be prescribed if 4 days has passed since the operation?

- A. Free,
- B. Extended bed-rest.
- C. Strict bed-rest,
- D. Semi-bed,

E. Sparing.

17. Teaching traumatological patient to the correct stereotype of walking starts with the following regime:

- A. Free,
- B. Extended bed-rest.
- C. Strict bed-rest,
- D. Ward,
- E. After being dismissed from the in-patient department.

18. The second (post-immobilizing) period is clinically characterized by:

- A. Restoration of anatomical bone integrity, formation of initial callus,
- B. Absence of pain in damaged area at static muscle tension,
- C. Restoration of muscular strength of the damaged extremity,
- D. Disappearance of edema in the damaged extremity,
- E. Restoration of mobility in immobilized joints.

19. Main tasks of exercise therapy in the first immobilization period at fractures of shins are all of the following except for one:

- A. Training of vestibular apparatus,
- B. Prophylaxis of stiffness in free of immobilization joints,
- C. Prevention of stagnant phenomena in lungs,
- D. Normalization in functions of cardiovascular, respiratory systems,
- E. Prevention of bedsores and muscular atrophy.

20. What special exercises are carried out in case of flat-footedness in order to achieve the correctness of foot deformation?

- A. Special types of walks, correcting exercises,
- B. Responsive exercises, exercises for breathing,

- C. Exercises for breathing, exercises for stretching,
- D. Ideomotor exercises, general strengthening exercises,
- E. Exercises with subjects, general strengthening exercises.

21. Contradictions for exercise therapy in abdominal surgery are:

- A. Heavy general condition of a patient caused by hemorrhage risk,
- B. Atony of urinary bladder,
- C. Subfebrile temperature,
- D. Bowels paresis,
- E. Presence of drainage in abdominal cavity.

22. What special exercises are carried out at damaging Achilles tendon in the 2nd (post-immobilizing) period?

- A. Exercises for mastering correct stepping, exercises for reflexes,
- B. Respiratory gymnastics, rhythm-plastic exercises, general developing exercises,
- C. Ideomotor exercises, isometric hip muscle tension,
- D. Active movements of toes, foot pronation and supination, dorsal and plantar flexion of a foot, foot circular movements,
- E. Active movements in a knee joint, rotational foot movements.

23. Absolute contradictions for exercise therapy prescription in thoracic surgery are all of the following except for one:

- A. Atony of bowels and urine bladder,
- B. Acute period in development of postoperative pneumonia,
- C. Intra-thoracic hemorrhage,
- D. Appearance of phlebothrombosis,
- E. Spontaneous pneumothorax.

24. Special tasks of exercise therapy in case of scoliosis:

- A. Backbone relief, increase of adaptation to physical loads,
- B. Increase of physical capacity for work by general training of a body.
- C. Improvement of a functional state of a cardiovascular system, respiratory organs, neuromuscular apparatus,
- D. Backbone relief, correction of scoliotic deformation, formation of muscular cast, formation of correct stepping habit,
- E. Correctness of scoliotic deformation, increase of physical capability for work.

25. Main types of exercises which are used in movement therapy in case of compression fractures in the 3rd period:

- A. Exercises with support and weighting, isometric muscle tension,
- B. Exercises for stretching, exercises for balance, trunk bends,
- C. Respiratory gymnastics, general strengthening exercises for small and moderate muscular groups,
- D. Passive actions of upper and lower extremities.
- E. Half squatting with direct back, alternate abduction and bringing legs, exercises with gymnastic subjects, walking.

26. Types of resolving exercises at scoliosis:

- A. Isometric,
- B. Active and passive,
- C. Symmetric and asymmetric,
- D. Ideomotor,
- E. Static and dynamic.

27. Duration of movement therapy for patients with trunk injury by individual methods:

- A. 10-15 minutes,
- B. 35-45 minutes,
- C. 25-35 minutes,
- D. 5-10 minutes,
- E. 45-50 minutes.

28. Main tasks of exercise therapy in the first (immobilizing period) at bone fractures:

- A. Increase of general life tone, prophylaxis of stagnant phenomena in lungs and pelvis minor,
- B. Improvement of blood and lymph circulation in immobilization of extremity, improvement of nervous regulation.
- C. Prophylaxis of muscular hypotrophy and stiffness in free of immobilization joints, prophylaxis of contractures,
- D. All the previous answers are correct,
- E. There are incorrect answers.

29. Patient, 25 years old, is in a traumatological department with a fracture of a right collarbone. Reposition of fragments was carried out, fixating bandage was applied. On what day in complex recovery movement therapy may be prescribed?

- A. 1-2 day,
- B. 2-3 day.
- C. 3-4 day,
- D. 4-5 day,
- E. 5-6 day.

30. What special exercises are carried out in case of flat-footedness in order to achieve the correctness of foot deformation?

- A. Special types of walks, correcting exercises,
- B. Responsive exercises, exercises for breathing,
- C. Exercises for breathing, exercises for stretching,
- D. Ideomotor exercises, general strengthening exercises,
- E. Exercises with subjects, general strengthening exercises.

31. Orthostatic sign allows us to estimate functional condition of:

- A. Central nervous system,
- B. Vegetative nervous system,
- C. Cardiovascular system,
- D. Sympathetic vegetative nervous system,
- E. Parasympathetic vegetative nervous system.

32. Treatment in case of a stroke by positioning in the lying position for upper extremity:

- A. Pose, opposite to Vernikke-Mann,
- B. Pose, corresponding to Vernikke-Mann,
- C. Position on the healthy side,
- D. Position on the injured side,
- E. Position with highly lifted upper half of a trunk.

33. In case of treatment patients with a stroke by positioning, placing on the back and side should be changed every:

- A. 4-6 hours,
- B. 20 minutes,
- C. 2 hours,
- D. 8-10 hours,
- E. 12 hours.

34. Means of exercise therapy which are used for patients with a stroke during extended bed period:

A. Treatment by positioning, respiratory exercises, active exercises for healthy extremities, willingness to movement,

B. Respiratory exercises with activation of inhaling, exercises for coordination, balance, static exercises, exercises with loads.

C. Respiratory exercises, restoration of walking habits, exercises for coordination and balance, outdoor walks, exercises with closed eyes on one place and in movement, elements of games,

D. Treatment by positioning, respiratory exercises, active exercises for healthy and paretic extremities,

E. Treatment by positioning, respiratory exercises, passive exercises for healthy and paretic extremities.

35. Main tasks of exercise therapy for a patient with a stroke in case of ward and free movement regimes больному с инсультом:

A. Further restoration of active movements by transposition to standing position, teaching to walk,

B. Counteract against гемиплегическим contractures and synkinesis,

C. Restoration of self-catering and everyday skills,

D. All the mentioned above answers are correct,

E. There are incorrect answers.

36. Duration of exercise therapy by individual methods for neurological patients is:

A. 10 minutes,

B. 20 minutes,

C. 30 minutes,

D. 40 minutes,

E. 50 minutes.

37. Patients with craniocerebral injuries in the first period are prescribed:

A. Treatment by positioning,

B. Passive exercises for upper and lower extremities,

C. Exercises for strengthening muscles of abdomen and pelvic floor,

D. Exercises for upper extremities with lifting them above shoulders,
exercises for coordination of movements,

E. Exercises aimed at increasing intra-abdominal pressure, general
strengthening exercises for all muscular groups at a fast pace.

38. Main relief initial positions for patients with lumbar radiculitis are:

A. Knee-ulnar, knee-wrist,

B. Lying on the abdomen,

C. Lying, sitting,

D. Standing,

E. Standing leaning on hands.

39. Movement therapy in case of facial nerve neuritis is prescribed since:

A. 1-2 day,

B. 3-6 day,

C. 6-10 day,

D. 10-12 day,

E. Exercise therapy is not recommended.

40. Complex treatment of complications of facial nerve neuritis –
contractures of paretic muscles and synkinesis includes:

- A. Special position (emplastic mask), medical mimic and sound gymnastics, massage, physio-therapeutic procedures,
- B. Conditioning to be cold, massage, movement therapy, warm procedures,
- C. Massage, physio-therapeutic procedures,
- D. medical mimic gymnastics, massage, balneotherapy,
- E. Medical treatment, physio-therapeutic procedures, massage.

41. Teaching a patient to correct walking stereotype begins with:

- A. free motor mode,
- B. bed-rest motor mode,
- C. strict bed motor mode,
- D. ward motor mode,
- E. After dismissal from in-patient department.

42. Complex treatment of complications of facial nerve neuritis – contractures of paretic muscles and synkinesis includes:

- A. Special position (emplastic mask), medical mimic and sound gymnastics, massage, physio-therapeutic procedures,
- B. Conditioning to be cold, massage, movement therapy, warm procedures,
- C. Massage, physio-therapeutic procedures,
- D. Medical mimic gymnastics, massage, balneotherapy,
- E. Medical treatment, physio-therapeutic procedures, massage.

43. After stroke a patient on the 2 B bed-rest motor mode is prescribed all of the following except for:

- A. Respiratory exercises,
- B. Passive exercises for a paretic extremity,
- C. Active exercises for paretic extremity from eased positions,
- D. Exercises for healthy extremities,

E. Active exercises with burdening for paretic extremity.

44. For solving the issue of possible extension of movement mode:

A. Standard functional tests and load tests are carried out,

B. Anthropometric examination is carried out,

C. Pulse and other subjective data before and after exercise therapy are studied,

D. Results of somatoscopy are taken into account,

E. Medical pedagogical observation is carried out.

45. Patient with a stroke on a strict bed-rest regime is prescribed:

A. Reflex movement,

B. Treatment by positioning,

C. Active exercises with burdening for paretic extremity and ideomotor exercises,

D. Dynamic respiratory exercises and exercises for coordination,

E. Passive exercises for paretic and healthy extremities.

46. Duration of exercise therapy procedure by a group method for neurological patients is:

A. 15 minutes,

B. 25 minutes,

C. 35 minutes,

D. 45 minutes,

E. 55 minutes.

47. Patients with craniocerebral injuries in the second period are prescribed movement therapy from initial position:

A. Lying,

- B. Sitting,
- C. Standing,
- D. Lying and sitting,
- E. Lying, standing, sitting.

48. Main relief initial positions for patients with cervical-thoracic radiculitis are:

- A. Standing leaning on hands.
- B. Lying on the abdomen,
- C. Lying, sitting,
- D. Standing,
- E. Knee-ulnar, knee-wrist,

49. Pace of carrying out medical exercises in patients with paresis of facial nerve is mainly:

- A. Slow or moderate,
- B. Slow.
- C. Intensifying,
- D. Quick,
- E. Interval.

50. In case of treating by positioning patient's position on the side should be changed every:

- A. 4-6 hours,
- B. 20 minutes,
- C. 2 hours,
- D. 8-10 hours,
- E. 12 hours.

Answers to tests on the topic

«Physical rehabilitation at surgical, traumatologic and orthopaedic practice.

Physical rehabilitation at neurology clinic»

Test	Answers	Test	Answers	Test	Answers
1	A	21	A	41	D
2	A	22	D	42	A
3	D	23	C	43	D
4	B	24	D	44	E
5	E	25	A	45	B
6	C	26	E	46	B
7	D	27	A	47	D
8	C	28	C	48	C
9	C	29	C	49	B
10	A	30	A	50	C
11	B	31	D		
12	B	32	A		
13	C	33	C		
14	D	34	A		
15	C	35	D		
16	B	36	B		
17	D	37	D		
18	A	38	E		
19	C	39	B		
20	A	40	A		

TESTS TO TOPIC

«Physical rehabilitation at obstetrics and gynaecology.

Physical rehabilitation at paediatric practice»

1. Contradictions for exercise therapy in ill children are:
 - A. Severe general condition of a child,
 - B. Toxicosis,
 - C. High temperature of a body,
 - D. Blood disease,
 - E. All the mentioned above.

2. Gymnastics for infants implies:
 - A. Reflex, passive, active exercises and massage,
 - B. Crawling,
 - C. Swimming,
 - D. Gymnastics is not carried out,
 - E. Gymnastics is carried out after 1 month.

3. Main task of exercise therapy in case of pneumonias in small children is:
 - A. Elimination of an asthenic condition,
 - B. Normalization of child's emotional tone,
 - C. Increase of body reactivity,
 - D. Assist phlegm discharge,
 - E. Assist bronchus obstruction.

4. When is exercise therapy prescribed in case of pneumonia?
 - A. On the 3-4 day of being in the hospital (in case of decrease of temperature),

- B. On 5-10 day of being in the hospital.
- C. On 10-15 day of being in the hospital,
- D. Since the first day of being in the hospital,
- E. After being dismissed from the in-patient department.

5. Which of the mentioned below examinations help to determine trunk mobility, muscle strength and abdominal muscles in case of scoliotic disease in children?

- A. Wrist dynamometry, back strength,
- B. Bends of the trunk touching floor with palms, back strength, holding legs in the initial position on the back under 45° for 1.5-2 minutes,
- C. Test of Genchi, back strength, orthostatic sign,
- D. Test of Shtange, back strength,
- E. Clonistatic test, holding legs in the initial position on the back under 90° for 3 minutes.

6. Tasks of exercise therapy during residual phenomena of rachitis are all of the following except for:

- A. Normalization of initial manifestation of a vegetative nervous system,
- B. Normalization of psycho-motor development,
- C. Correctness of deformations in musculoskeletal system,
- D. Increase of non-specific defense forces of a body,
- E. Normalization of functions in organs and systems affected by rachitis.

7. In case of pneumonia school-age children, are on a ward regime exercise therapy includes:

- A. Active respiratory exercises,
- B. Passive exercises for extremities, medical massage,
- C. Active exercises for extremities, reflex exercises, medical massage,

- D. Reflex and active exercises,
- E. Massage of a chest, general strengthening and drainage exercises, dynamic respiratory diseases, breathing with support.

8. At what age should stroking massage be prescribed for a child with twisted neck?

- A. 2 weeks,
- B. 1 month,
- C. 2 months,
- D. 6 months,
- E. 10-12 months.

9. Tasks of exercise therapy in case of hypotrophy:

- A. Improvement and normalization of main nervous processes,
- B. Improvement of metabolism,
- C. Improvement of body's defense forces,
- D. Normalization of functions of digestive and other organs,
- E. All the mentioned above.

10. What periods does exercise therapy course include under hospital conditions for children with bronchial asthma?

- A. Preparatory, main and conclusive,
- B. Preparatory, main,
- C. Preparatory, conclusive,
- D. Only main,
- E. None of the mentioned above.

11. Contradictions to exercise therapy for small children are:

- A. Acute gastrointestinal disorders,

- B. Hear diseases in decompensate stage,
- C. Inflammatory processes on skin,
- D. Disorders in child's consciousness,
- E. All the mentioned above.

12. Which is not the contradiction for exercise therapy for children with respiratory diseases?

- A. Improvement of external breathing function,
- B. Increase of erythrocyte sedimentation rate and high body temperature,
- C. Acute inflammatory process with severe course,
- D. Acute emaciation of a patient,
- E. Bronchial asthma attack.

13. Gymnastics for infants implies:

- A. Massage,
- B. Reflex exercises,
- C. Passive exercises,
- D. Active exercises,
- E. All the mentioned above.

14. What are the main tasks of exercise therapy for a child with torticollis?

- A. Improvement of trophism of the damaged muscle, ability to decrease muscular contracture, prophylaxis of asymmetrical skull development,
- B. Increase of backbone mobility, prevention of asymmetrical backbone development,
- C. Restoration of motor skills, correctness in deformation of a musculoskeletal system,
- D. Prevention of muscular hypotonic development, normalization of disorders in psychomotor development,

E. Normalization of functional organs and systems, prevention of deformations in a musculoskeletal system.

15. A new-born baby was diagnosed torticollis in a maternity home. At what age should a stroking massage be administered?

- A. 2 weeks,
- B. 2 months,
- C. 6 months,
- D. 1 month,
- E. 10-12 months.

16. Tasks of exercise therapy in case of pneumonias of small children:

- A. Prophylaxis of a relapse,
- B. Constant recovery of external breathing function,
- C. Stimulation of body's defense forces,
- D. Elimination of flatulence and improvement of bowels functions,
- E. All the mentioned above.

17. Boy, 13 years old, is ill with bronchial asthma. What exercises should he do after elimination of a bronchospasm?

- A. Static breathing, exercises with pronouncing whistling, buzzing sounds at prolonged exhaling, exercises for chest muscle relaxation,
- B. Drainage exercises, dynamical breath exercises with intensification at inhaling, general strengthening exercises,
- C. Dynamic respiratory exercises and drainage exercises,
- D. Static and dynamic breath exercises,
- E. Drainage exercises, postural drainage, general strengthening exercises.

18. Tasks of exercise therapy in case of hypotrophy:

- A. Improvement and normalization of main nervous processes,
- B. Improvement of metabolism,
- C. Improvement of body's defense forces,
- D. Normalization of functions of digestive organs and other systems,
- E. All the mentioned above.

19. What special exercises are carried out in case of flat-footedness для in order to achieve the correctness of foot deformation?

- A. Special types of walks, correcting exercises for a foot and stepping, general strengthening exercises,
- B. Responsive exercises, exercises for breathing,
- C. Exercises for breathing, exercises for stretching,
- D. General strengthening exercises,
- E. Exercises with subjects, general strengthening exercises.

20. Special tasks of exercise therapy in case of scoliosis:

- A. Increase of physical capacity for work by general training of a body,
- B. Improvement of a functional state of a cardiovascular system, respiratory organs, neuromuscular apparatus,
- C. Backbone relief, correction of scoliotic deformation, formation of muscular cast, formation of correct stepping habit,
- D. Backbone relief, increase of adaptation to physical loads,
- E. Correctness of scoliotic deformation, increase of physical capability for work.

21. A woman is pregnant, course of pregnancy is normal, pregnancy term 17 weeks, in prenatal clinic exercise therapy has been prescribed. What tasks of exercise therapy are in this period of pregnancy?

A. Strengthening of muscles, which take part in labor, provision of a norm blood supply for a fetus, oxygen supply, adaptation of a cardiovascular system to physical loads,

B. To create skills of rhythmic breathing with intensification on diaphragm, increase of oxygen supply to the body, normalization of functions of vegetative nervous system.

C. Prevention of venous stagnation in vessels of small pelvis and lower extremities, strengthening of muscles, which take part in labor,

D. Strengthening of abdominal muscles, intensification of force and stamina, improvement of posture, constipation fighting, prevention of intrauterine hypoxia,

E. Strengthening of bone-muscular system, improvement of conditions, fostering full-grown development of a fetus.

22. A woman, 22 years old, is pregnant, term 28 weeks. During examination pelvic presentation of a fetus was discovered. At what time of pregnancy should correcting gymnastics be prescribed for transitioning fetus to head presentation?

A. From 20 to 28 weeks,

B. From 29 to 35 weeks,

C. From 36 to 40 weeks,

D. From 33 to 44 weeks,

E. From 17 to 20 weeks.

23. In the third period of pregnancy (34 weeks) gymnastics includes:

A. Exercises for prevention of varix dilatation and improvement of blood circulation in the area of small pelvis,

- B. Passive exercises for extremities, general developing exercises,
- C. Exercises which increase intra-abdominal pressure,
- D. General developing exercises, exercises for training diaphragm type of breathing,
- E. Dynamic exercises for extremities, general developing exercises.

24. A woman, 20 years old, maternity patient (3 days after childbirth), delivery was normal, post-birth period is smooth. Movement therapy was prescribed. What are the tasks during this period?

- A. To assist acceleration of adaptation of a body to new conditions,
- B. To increase general body tone, decrease blood flow to the area of small pelvis,
- C. To restore posture, prevent prolapsus and other anomaly positions of uterus, increase woman's capacity for work,
- D. Normalization of anxiety and inhibition of processes, improvement of functions on cardiovascular system, increase of pulmonary ventilation volume,
- E. To improve blood and lymph circulation in organs of small pelvis, general strengthening action, increase in organism's resistance to infections, to assist the reduction of scratched abdominal wall.

25. Absolute contradictions for carrying out movement therapy after Cesarean section are:

- A. Acute cardiovascular insufficiency,
- B. Subfebrile temperature, bowels paresis.
- C. Meteorism, exacerbation of lumbar osteochondrosis,
- D. Acute bronchitis, subfebrile temperature,
- E. Atony of urine bladder, meteorism.

26. In the past 3-4 weeks of pregnancy movement therapy includes exercises for:

- A. For muscles of pelvic floor,
- B. For relaxation.
- C. Muscles of abdominal press in initial position lying on the back,
- D. For distal areas of extremities in initial position lying on the back,
- E. Exercises for breathing.

27. In the period of pregnancy it is preferable to use the following exercises:

- A. Dynamic,
- B. Static,
- C. Static-dynamic,
- D. Isometric,
- E. Ideomotor.

28. Appearance in some women during the second half of pregnancy postural hypotonic syndrome in lying position on the back is connected with:

- A. Limitation of diaphragm movement due to enlarged uterus,
- B. Pressure of uterus and internal organs on celiac plexus.
- C. Uterus compression of abdominal aorta,
- D. Uterus compression of inferior vena cava and nerve plexus,
- E. There is no correct answer.

29. Carrying out physical exercises in pregnant women are stopped in case of:

- A. Systematic appearance of spasmodic pains after lessons,
- B. Fatigue after lessons,
- C. Increase of respiratory rate during lessons,

- D. Increase of pulse during lessons by 8 beats per minute from initial level,
- E. There is no correct answer.

30. In case of uterus retroflexion exercises for relaxation are carried out from the following initial position:

- A. Lying on the abdomen (prone),
- B. Lying on the back,
- C. Sitting on the chair,
- D. Standing,
- E. There is no correct answer.

31. A woman, 24 years old, maternity patient (15 days after childbirth), delivery was fine, post-birth period is smooth. Movement therapy has been prescribed. What is the purpose of movement therapy at this level?

- A. Improvement of blood and lymph circulation in organs of small pelvis, to assist contraction of the scratched abdominal wall, to prevent appearance of anomaly positions of uterus,
- B. To assist acceleration in adaptation of the woman's body to new conditions,
- C. To restore posture, not to permit prolapsus and other anomalies of uterus location, to increase the woman's capacity for work,
- D. To increase general tone of a body, to decrease blood flow to small pelvis and increase resistance of the body to infections,
- E. Normalization of stimulation and inhibition, improvement of functions in a cardiovascular system, increase of pulmonary ventilation volume.

32. Absolute contradictions for carrying out movement therapy after Cesarean section are:

- A. Acute bronchitis, subfebrile temperature,

- B. Subfebrile temperature, bowels paresis.
- C. Meteorism, exacerbation of lumbar osteochondrosis,
- D. Thrombophlebitis,
- E. Atony of urine bladder, meteorism.

33. Contradictions to movement therapy in case of inflammatory diseases of female genital organs:

- A. Acute inflammatory process with increase of temperature and erythrocyte sedimentation rate,
- B. Repeated infertility,
- C. Menstrual cycle disorders,
- D. Tubo-ovaritis,
- E. Endometritis.

34. Main tasks of exercise therapy in case of prolapse of uterus:

- A. Strengthening muscles of pelvic floor, abdominal wall, back,
- B. To restore correct position of uterus,
- C. To restore physiological function of ligaments of uterus,
- D. All the previous answers are correct,
- E. There are incorrect answers.

35. A woman, 34 years old, maternity patient, after Cesarean section is in a postnatal ward. Postoperative period passes without complications. On what day after the operation should the procedure of movement therapy with exercises for pelvis muscles and muscles of abdominal wall be used??

- A. Since the 2th day,
- B. Since the 3rd day,
- C. Since the 4nd day,
- D. Since the 5th day,

E. Since the 6th day.

36. A woman, 23 years old, maternity patient is in a maternity home, childbirth was normal, post-birth period passes smoothly. When should movement therapy be started?

A. On the 1nd day,

B. On the 2st day,

C. On the 3rd day,

D. On the 4th day,

E. On the 5th day.

37. Which initial position is excluded from movement therapy on the III trimester of pregnancy?

A. Lying on the back,

B. Lying on the side,

C. Sitting,

D. Standing,

E. There is no correct answer.

38. Contradictions to exercise therapy after childbirth are:

A. Weakness due to big blood loss,

B. General fatigue,

C. Perineal rupture I level,

D. Perineal rupture II level,

E. Sutures on perineum after perineotomy.

39. In case of retroflexion of uterus the following positions are excluded from the set:

A. Lying on the back,

- B. Lying on the side,
- C. Sitting,
- D. Standing,
- E. Knee-ulnar.

40. In case of surgery during childbirth 2 hours after the operation the following exercise is prescribed:

- A. Breath and general strengthening,
- B. Breath and for strengthening of abdominal wall.
- C. Breath and for pelvic floor,
- D. Breath, static and dynamic,
- E. There is no correct answer.

Answers to tests on the topic

«Physical rehabilitation at obstetrics and gynaecology.

Physical rehabilitation at paediatric practice»

Test	Answers	Test	Answers
1	C	21	E
2	D	22	A
3	B	23	C
4	B	24	C
5	A	25	B
6	E	26	C
7	C	27	B
8	D	28	D
9	B	29	E
10	B	30	E
11	D	31	A
12	C	32	C
13	A	33	B
14	E	34	D
15	C	35	D
16	D	36	E
17	B	37	B
18	B	38	A
19	A	39	B
20	C	40	C

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