To assess for hip internal rotation, the patient would lie supine, bend his knee, and turn his lower leg and foot away from the midline. To assess hip abduction, the patient would lie supine and move his lower leg away from the midline. To assess hip extension, the patient would lie face up, bend his knees, place feet flat on the table, and lift his buttocks off the table. To assess for external rotation of the hip, the patient would lie supine, bend his knee, and turn the lower leg and foot toward the midline.

Question:

Children with Legg-Calve Perthes disease should:

avoid weight bearing on the affected extremity

Explanation:

Legg–Calvé–Perthes disease is a childhood hip disorder initiated by a disruption of blood flow to the head of the femur. Due to the lack of blood flow, the bone dies (osteonecrosis or avascular necrosis) and stops growing. Over time, healing occurs by new blood vessels infiltrating the dead bone and removing the necrotic bone which leads to a loss of bone mass and a weakening of the femoral head. The bone loss leads to some degree of collapse and deformity of the femoral head and sometimes secondary changes in the shape of the hip socket. The goals of treatment are to decrease pain, reduce the loss of hip motion, and prevent or minimize permanent femoral head deformity so that the risk of developing severe degenerative arthritis as an adult can be reduced. Diet and sleeping on a firm mattress do not alter the course of the disease. However, avoiding high impact sports such as basketball during treatment is essential since increased weight on the hip will cause further damage.

Question:

The convex medial end of the clavicle that articulates with the concave hollow in the upper sternum is referred to as the:

Sternoclavicular joint

Explanation:

The convex medial end of the clavicle articulates with the concave hollow in the upper sternum to form the sternoclavicular joint. The glenohumeral joint is where the head of the humerus articulates with the shallow glenoid fossa of the scapula. This joint is deeply situated and not normally palpable. The acromioclavicular joint lies at the lateral end of the clavicle and articulates with the acromion process of the scapula. There is no manubrium joint; it is the broad upper part of the sternum.
Infrapatellar bursitis

Question:

Joints in which bones are slightly moveable and fibrocartilaginous discs separate the bony surfaces are referred to as:

Cartilaginous joints

Question:

A 64-year-old man complains of worsening pain that radiates from the right buttock to the upper posterior upper thigh. This is a common complaint associated with:

Sciatica

Question:

A 65-year-old patient is noted to have positive drop arm test. This finding is consistent with:

Rotator cuff tear

Question:

The lesser tubercle of the humerus is located:

In front of the head of the humerus, and is directed medially and anteriorly

Question:

A small, tuberculated eminence, curved a little forward and giving attachment to the radial collateral ligament of the elbow-joint is referred to as the:

Anterior epicondyle of the humerus

Question:

The scapulohumeral group of muscles:

Rotates the shoulder laterally

Question:

When examining the patient for wrist extension, the NP instructs the patient to place his palms down and to:

Point his fingers toward the ceiling

Question:
Tibial tendinitis

Question:
The NP instructs the patient to move his chin to his chest. This maneuver assesses cervical Flexion.

Question:
When grading muscle strength, a grade of two would indicate:
Active movement of the body part with gravity eliminated.

Question:
Pain and crepitus over the patella suggests:
Roughening of the patellar undersurface.

Question:
When grading muscle strength, a grade of four would indicate:
Active movement against gravity with one resistance.

Question:
A patient complains of aching pain in the neck and points to the cervical paraspinal muscles and ligaments. He complains of muscle spasms and stiffness in the upper back and shoulder for the past 6 weeks. These findings may be associated with:
Mechanical neck pain.

Question:
Lateral bending of the neck occurs primarily between the skull and:
Cervical vertebrae 2-7 (C2-7).

Question:
When examining the ankle and foot, the NP moves the proximal phalanx of each toe up and down. This maneuver assesses the:
Metatarsophalangeal joint.

Question:
The lateral malleolus is located at the:
Distal end of the fibula

Question:
To test the thumb for extension, ask the patient to:
Move his thumb from the fifth finger and then as far away from the palm as possible.

The prepatellar bursa of the knee lies:
Between the patella and the overlying skin

Question:
The principal muscles involved when opening the mouth are the:
External pterygoid muscles

Question:
With the patient standing and the examiner sitting in the chair the examiner should observe:
Alignment of the legs and feet

Question:
A normal finding in the musculoskeletal assessment of a 3-year-old child would be the presence of:
Genu-valgum

Question:
Joints in which bones do not touch each other, and the joint articulations are freely moveable (within the limits surrounding ligaments) are called:
Synovial Joints

Question:
Physical sign associated with mechanical neck pain with whiplash include:
Decreased neck range of motion

Question:
When grading muscle strength, a grade of one would indicate:
Barely detectable trace of contraction

Question:

When inspecting the shoulder girdle, an elevation of the right shoulder was noted. This finding could be associated with:

Scoliosis

Question:

After attempting to elicit the Moro reflex in a newborn, the nurse practitioner identifies absence of movement of the left arm.

Examine the clavicle

Question:

When performing a spinal exam, the NP noted the appearance of poor posture and a “hump” appearance of the upper back. This finding could be suggestive of:

Thoracic kyphosis

Question:

When assessing the knee, the examiner instructs the patient to bend his knee. The motion would assess knee:

Flexion

Question:

The NP instructs the patient to lie supine, and move his lower leg away from the midline. This maneuver would help assess hip:

Abduction

Question:

Collagen fibers connecting muscle to bone are known as:

Tendons

Question:

When examining the ankle and the foot of a patient, the NP instructs the patient to move the heel outward. This motion assesses:
When examining the foot of a pt, the NP notes a bony projection along the edge of the right calcaneus with minimal pain and tenderness to touch. This could be suggestive of:

A bone spur

Question:

Contracture of the sternocleidomastoid muscle could result in lateral deviation and rotation of the head. This condition is suggestive of:

Torticollis

Question:

If a pt presents with non-midline lumbar back pain, the NP should assess for:

Muscle strain

Question:

Thenar Atrophy suggests:

A median nerve disorder

Question:

The thick curved extension of the superior border of the scapula is referred to as the:

Coracoid process

Question:

Following injury to the extremities, assessment for the neurovascular competency should include:

Skin color, temperature, movement, and sensation of the extremity

Question:

The shoulder derives its mobility from a complex interconnected structure which includes three large bones, three principal groups, and:

Four Joints

Question:
Acromion process

Question:
The joint that articulates with the concave condyles of the tibia is the:

Tibiofemoral joint

Question:
The bony structures of the shoulder include all of the following except:

Teres minor

Question:
When examining the pt for wrist abduction, the NP instructs the pt to position his palms down and:

Move his fingers away from the midline

Question:
When examining the ankle and foot of a pt, the NP instructs the pt to point the foot toward the floor. This motion assesses:

Ankle flexion

Question:
When examining the medial and lateral meniscus, a click along the medial joint with valgus stress, external rotation, and leg extension suggests a probable tear of the:

Posterior portion of the medial meniscus

Question:
The NP is examining the elbow of a 16-year-old male athlete. Increased pain is noted when he tries to extend his wrist against resistance. This finding is most consistent with:

Lateral epicondylitis

Question:
Another term used to describe rotator cuff tendinitis is:

Impingement syndrome

Question:
Osteoarthritis

Question:

When a pt complains of joint pain as progressing from one joint to another, the examiner should consider this pattern of involvement as migratory. This type of involvement would most likely be observed in a pt who has:

Rheumatic fever

Question:

The groove of the metacarpophalangeal joint can be palpated by having the patient:

Flex his hand

Question:

The axiohumeral group of muscles include which one of the following:

Pectoralis major

The area located between the olecranon process and the skin is known as the:

Olecranon bursa

Question:

On examination of the feet, the NP notes a dusky red swelling extending beyond the margin of the metatarsophalangeal joint of the right great toe. It is hot on palpation and the pt states it is painful to touch. These findings are suggestive of:

Acute gouty arthritis

Question:

Swelling on the posterior and medial surface of the knee would be suggestive of:

Semimembranous bursitis

Question:

The structure that projects from the spinal column posteriorly in the midline is referred to as the:

Spinous process

Question: