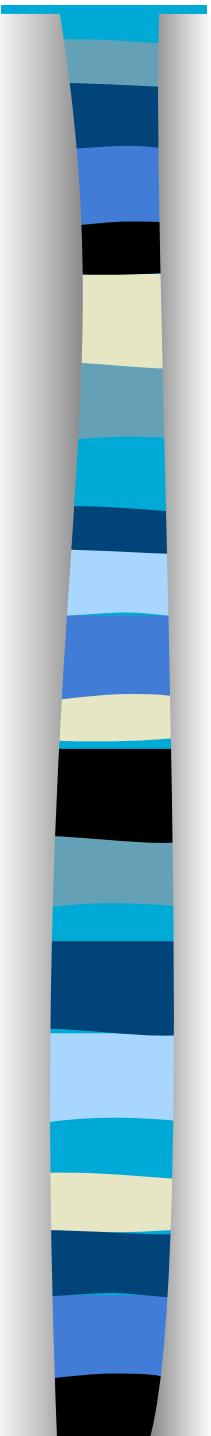


# 86a MBLEx Prep

## ABMP Exam Coach

### Special Populations

- Clients over 55
- Clients who are Obese
- Clients who are Children
- Clients who are pregnant
- Clients who are athletes
- Clients at the End of Life
- Clients with Disabilities



# 86a MBLEx Prep

## Class Outline

5 minutes	Attendance, Breath of Arrival, and Reminders
10 minutes	Lecture:
25 minutes	Lecture:
15 minutes	Active study skills:
60 minutes	Total

# 86a MBLEx Prep

## Class Outline

### Quizzes:

- 87a Kinesiology Quiz (semispinalis, splenius capitis, and splenius cervicis)
- 90b Kinesiology Quiz (erectors, multifidi, rotatores, quadratus lumborum, levator scapula, trapezius, splenius capitis, splenius cervicis, semispinalis capitis)

### Spot Checks:

- 87b Orthopedic Massage: Touch Assessment

### Exams:

- 89a Practice MBLEx (100 questions in 2 hours)

### Preparation for upcoming classes:

- 87a MBLEx Prep
  - Using ABMP Exam Coach, select “Study Subjects”, and then “Career Development”
  - For each of the 4 Massage Theory Topics, “Take a Practice Quiz” 4 times (16 total)
  - Research anything that isn’t clear on the Internet and bring what you find to class
- 87b Orthopedic Massage: Touch Assessment
  - Packet J: 81-81 and 87-88.

# Classroom Rules

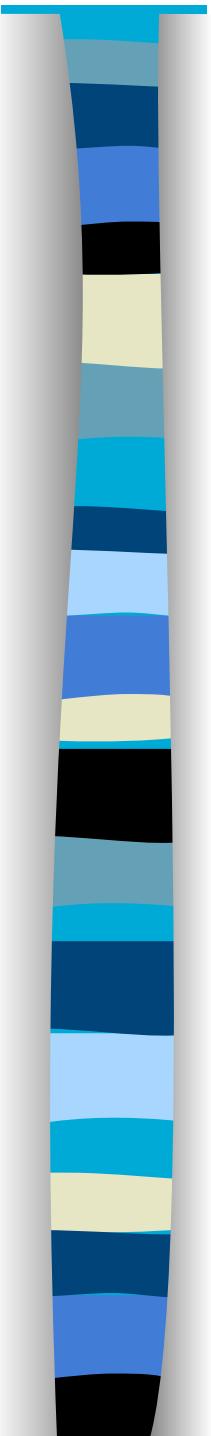
**Punctuality** - everybody's time is precious

- Be ready to learn at the start of class; we'll have you out of here on time
- Tardiness: arriving late, returning late after breaks, leaving during class, leaving early

**The following are not allowed:**

- Bare feet
- Side talking
- Lying down
- Inappropriate clothing
- Food or drink except water
- Phones that are visible in the classroom, bathrooms, or internship

*You will receive one verbal warning, then you'll have to leave the room.*



# Special Populations

## Clients over 55

- Aging 15-32
- Alzheimer's 36-37
- Benefits 41-48
- Decubitus ulcers 52-53
- Dementia 57-58
- Frail 62-65
- Level vitality 69-82
- Massage cautions 86-94
- Older adult 98-107
- Orthostatic Hypotension 111-120
- Parkinson's Disease 124 - 130
- Stroke 129-130
- Vigor 134-135

# Special Populations

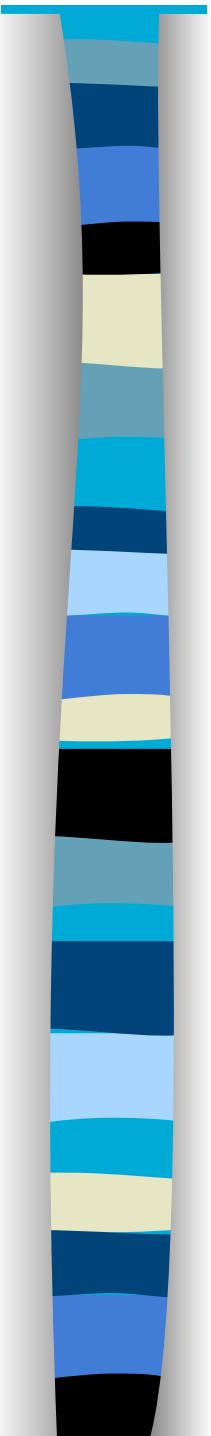
## Clients who are Obese

- Basic terminology 139-161
- Causes 165-174
- Quality of life 178-183
- Benefits 187-196
- Cautions 200-213
- Considerations 217-228
- Obesity-Associated Pathologies 232-243

# Special Populations

## Clients who are Children

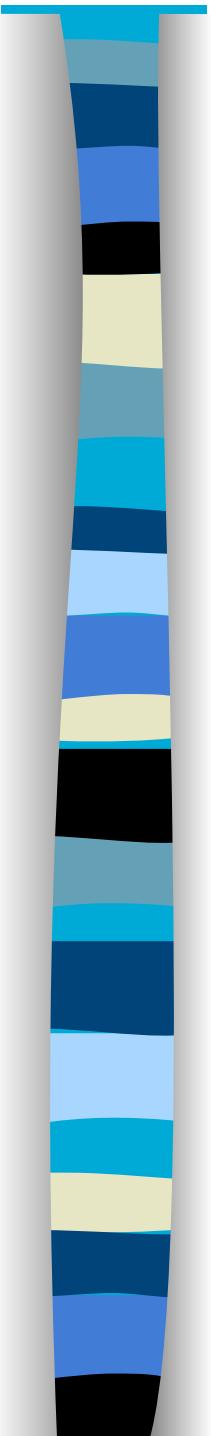
- Age groups 247-255
- Infant Behavioral Cues 259-266
- Benefits of Massage for Infants 270-283
- Cautions for Infant Massage 287-305
- Child Development 309-319



# Special Populations

## Clients who are Pregnant

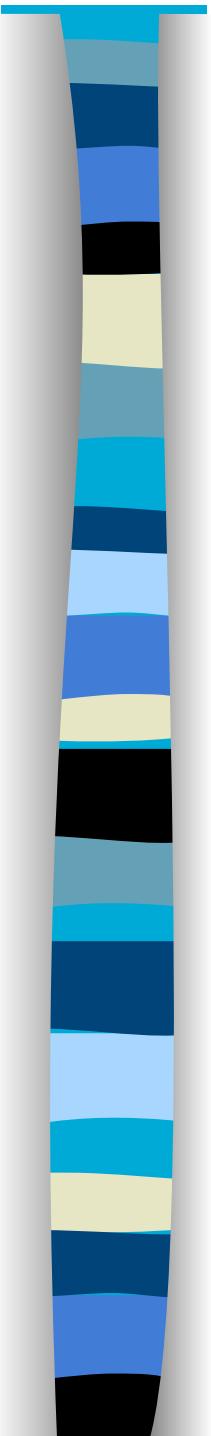
- Trimesters 323-351
- Delivery 355-371
- Benefits of Massage 375-384
- High-risk Pregnancy 388-397
- Cautions & Contraindications 401-413
- Pregnancy-Associated Conditions 417-425



# Special Populations

## Clients who are Athletes

- Sports Massage 429-435
- Types of Sports Massage 439-461
- Sports Massage Techniques 465-479
- Benefits of Sports Massage 483-487
- Conditions affecting Athletes 491-523



# Special Populations

## Clients at the End of Life

- End of Life 527-535
- Phases of Dying 539-571
- Techniques 575-583
- Locations 587-591

# Special Populations

## Clients with Disabilities

- Types 595-613
- Best Practices 617-637
- Functional Impairments 641-657
- Neurological Impairments 661-665



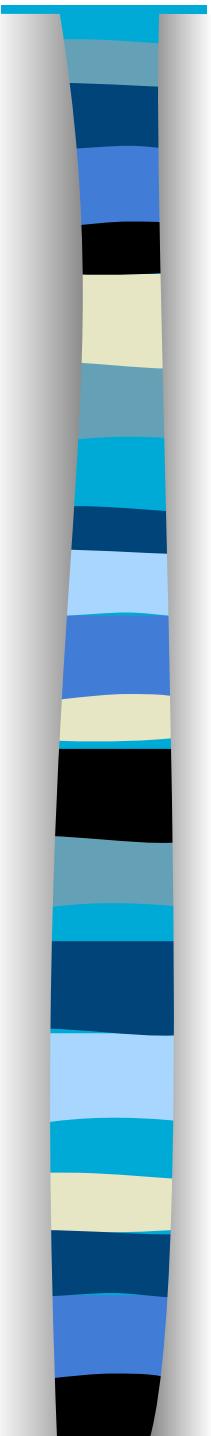




# ABMP Exam Coach

Special Populations:  
Clients over 55

Aging

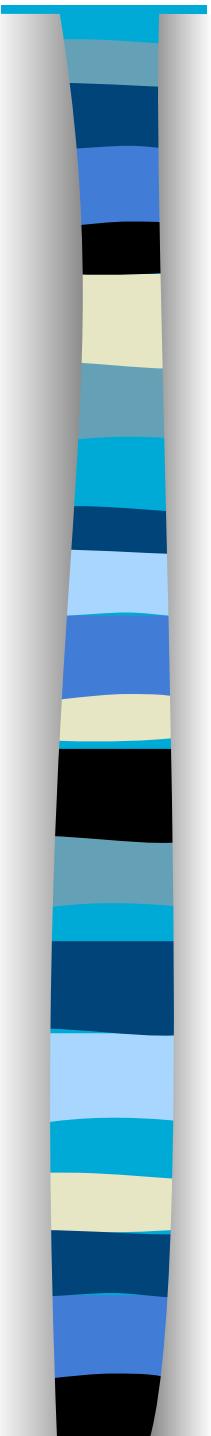


# Aging

As people age, changes in collagen and elastin production lead to:

- A. Tougher, denser skin
- B. Increased scar tissue production
- C. Adhered muscle fibers
- D. Less elasticity and tone

Q



# Aging

As people age, changes in collagen and elastin production lead to:

- A. Tougher, denser skin
- B. Increased scar tissue production
- C. Adhered muscle fibers
- D. Less elasticity and tone**

A

# Aging

As people age, cardiac output:

- A. Decreases
- B. Increases
- C. Remains stable
- D. Becomes erratic

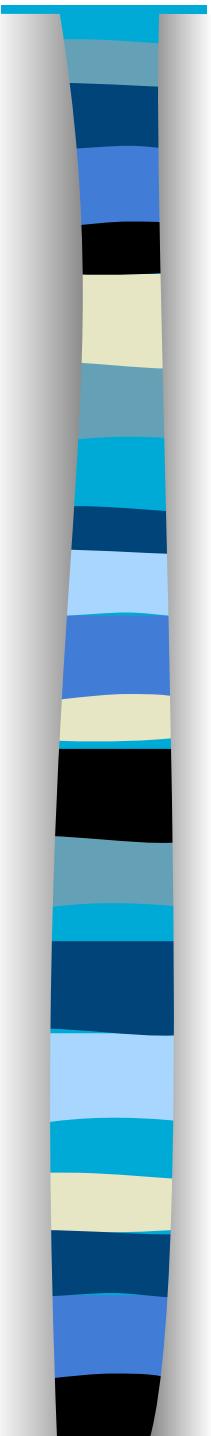
Q

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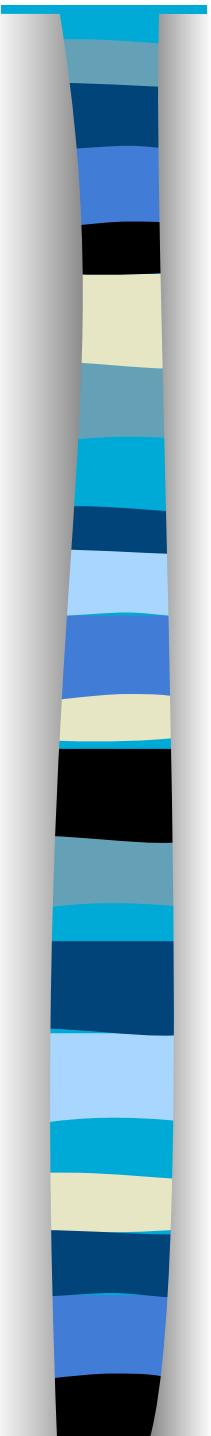


# Aging

As people age, the body experiences:

- A. Erratic nerve conduction
- B. The same level of nerve conduction
- C. Faster nerve conduction
- D. Slower nerve conduction

Q

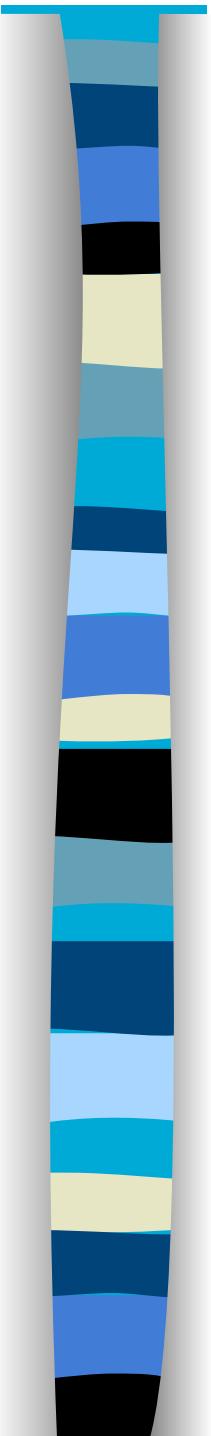


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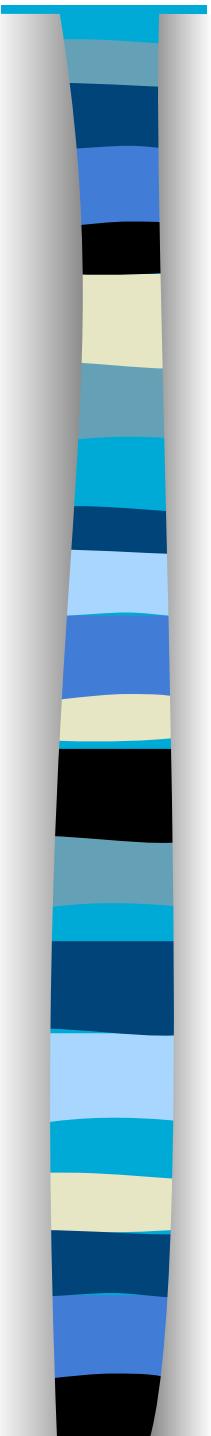


# Aging

As people age, the body experiences:

- A. Increased circulation and lymph flow
- B. Erratic levels of circulation and lymph flow
- C. Decreased circulation and lymph flow
- D. The same level of circulation and lymph flow

Q

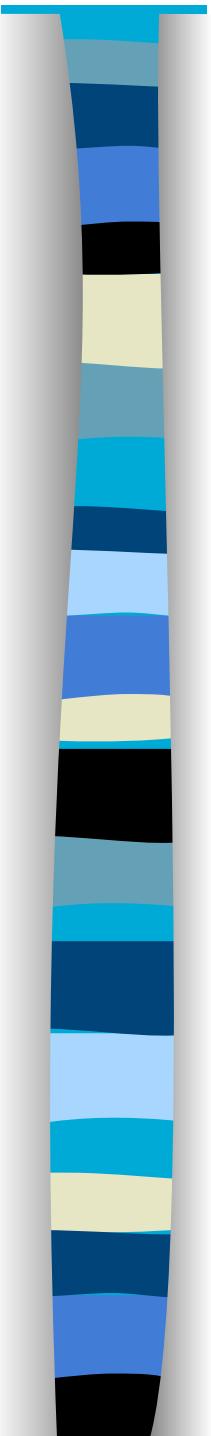


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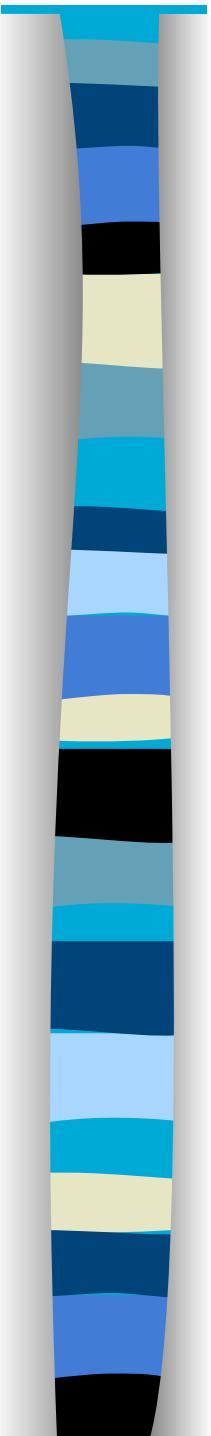


# Aging

As people age, general mobility:

- A. Remains stable
- B. Decreases
- C. Increases
- D. Becomes unstable

Q

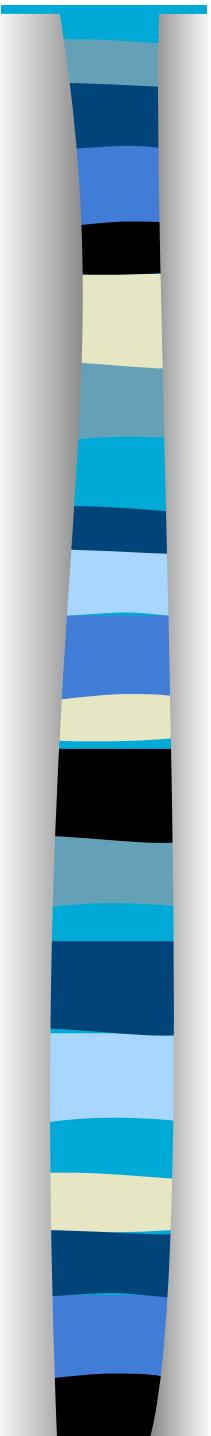


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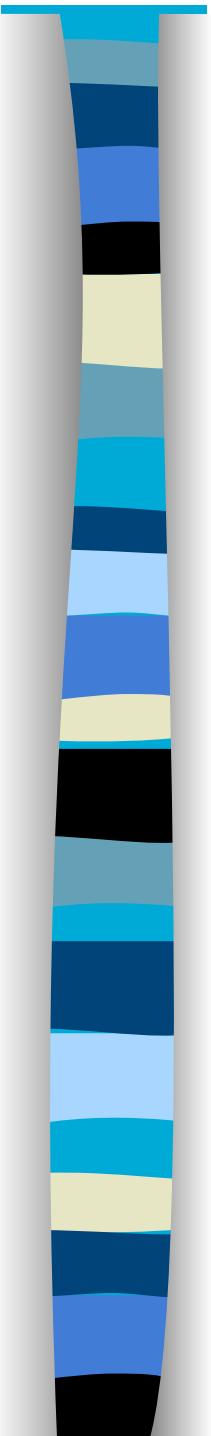


# Aging

As people age, arteriosclerosis:

- A. Often develops
- B. Often causes scar tissue
- C. Often decreases
- D. Often disappears

Q

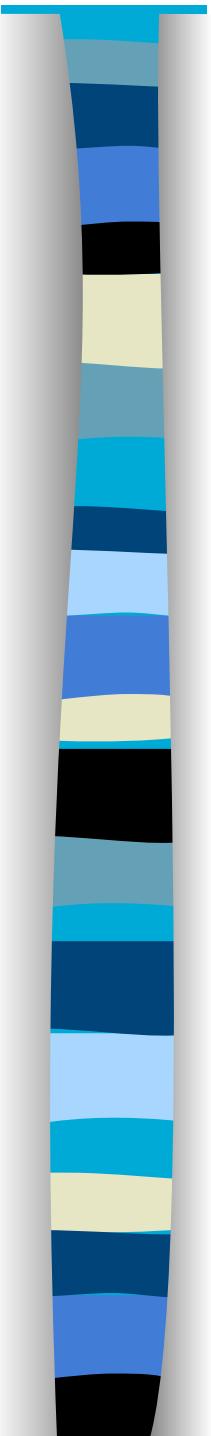


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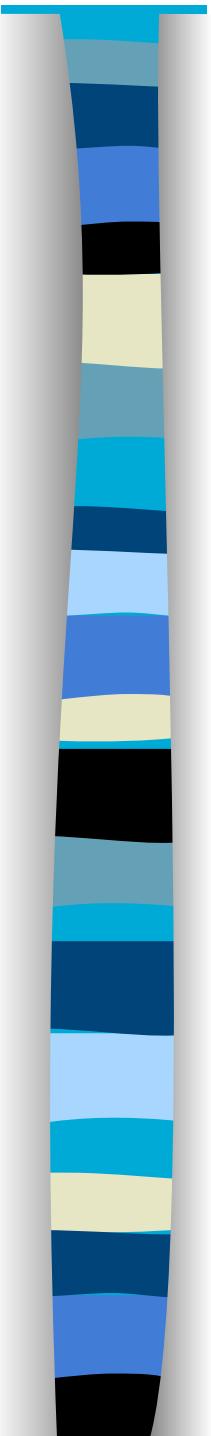


# Aging

As people age, lean body mass and strength:

- A. Become erratic with good days and bad days
- B. Decline due to loss and atrophy of muscle cells
- C. Remain stable unless hormonal imbalances are present
- D. Increase due to increased myocell production

Q

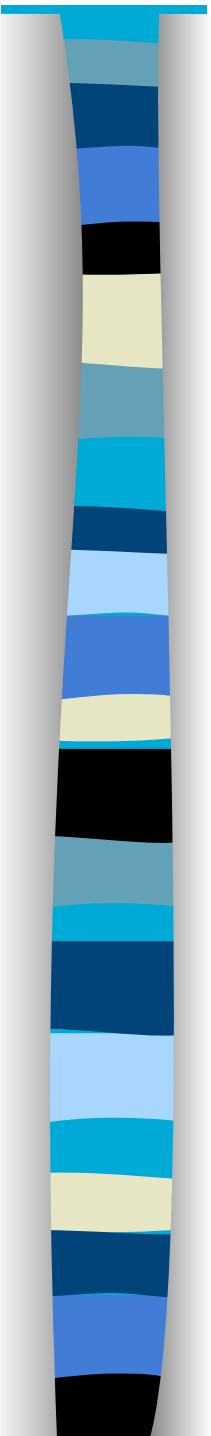


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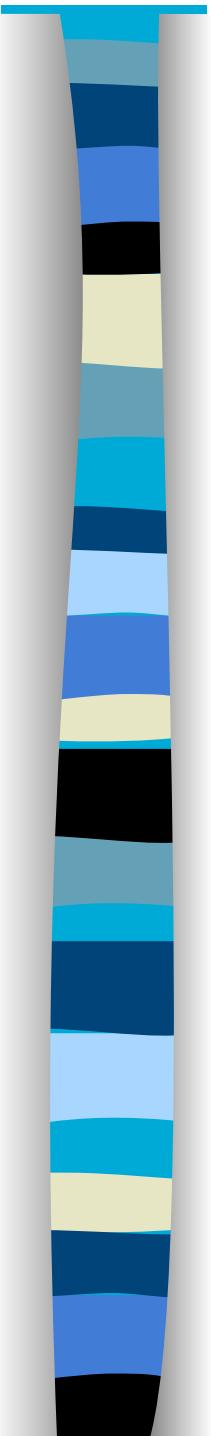


# Aging

As people age, the epidermis of the skin is affected, leading to:

- A. Increased scar tissue production
- B. Adhered muscle fibers
- C. Tougher, denser skin
- D. Thinner, more fragile skin

Q

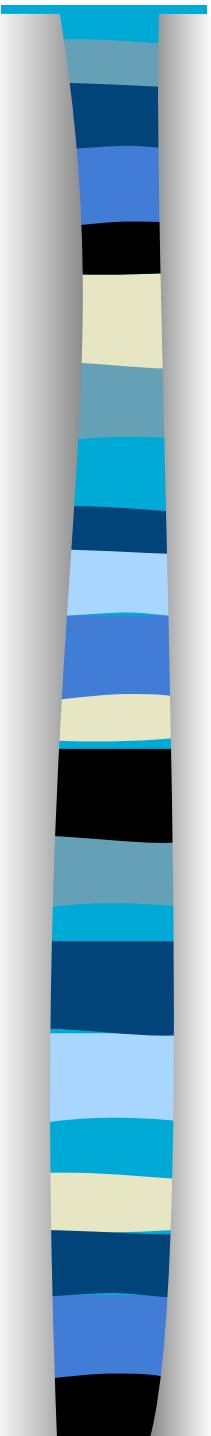


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- D. Thinner, more fragile skin**

A



# Aging

**Aging** The physical process of growing older.

In that process, every body system is affected:

- The epidermis of the skin becomes thinner and less elastic
- Cardiac output decreases
- Blood pressure increases as arteriosclerosis often develops.
- Strength decline, due to loss of muscle cells, comes with a decrease of general mobility
- There is slower nerve conduction
- Decreased circulation and lymph flow
- Decreased immunity
- Loss of flexibility
- Degenerative changes to joints as bone mass decreases
- Impaired lung capacity

## Definition



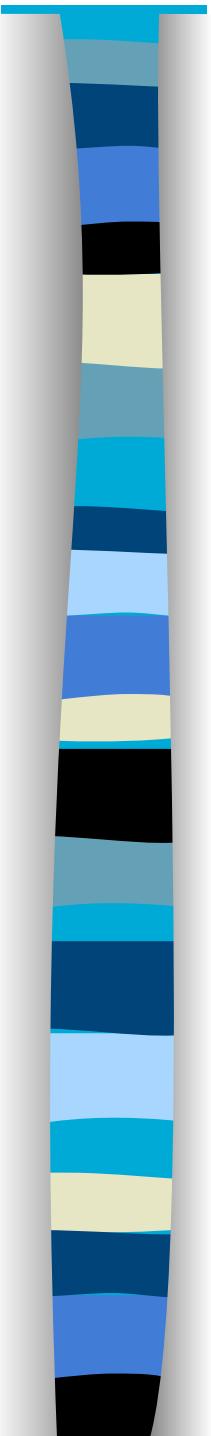




# ABMP Exam Coach

Special Populations:  
Clients over 55

Alzheimer's



# Alzheimer's

**Alzheimer's disease** A progressive degenerative disorder of the brain involving:

- The death of neural tissue that leads to loss of memory
- Deterioration of thinking and language skills
- Pronounced behavioral changes

## Definition



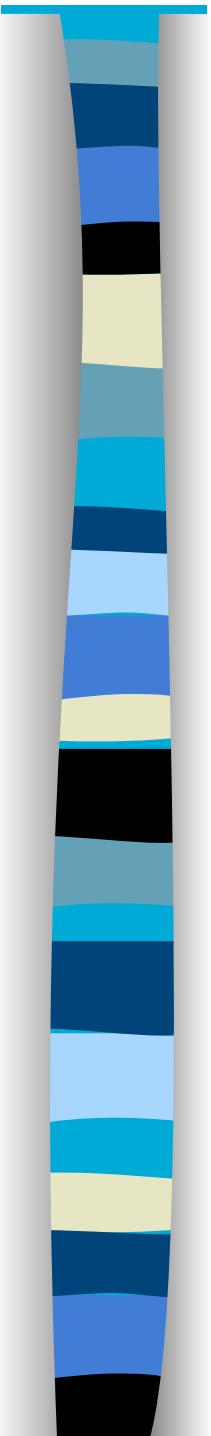




# ABMP Exam Coach

Special Populations:  
Clients over 55

Benefits

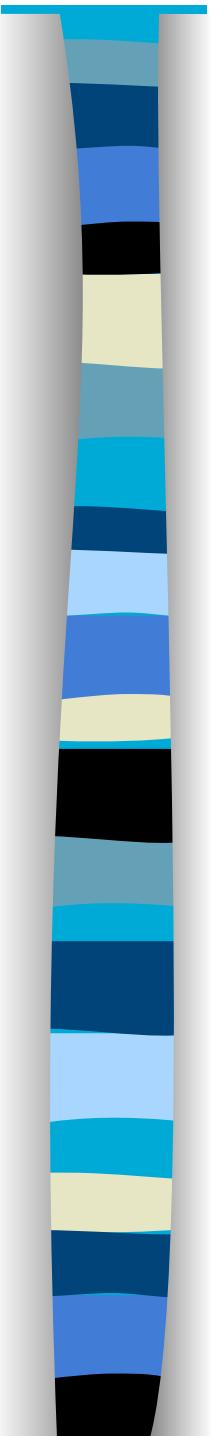


# Benefits

All of the following are benefits of massage for older adults, EXCEPT:

- A. Increased flexibility
- B. Decreased osteoporosis
- C. Increased sleep quality
- D. Decreased pain

Q

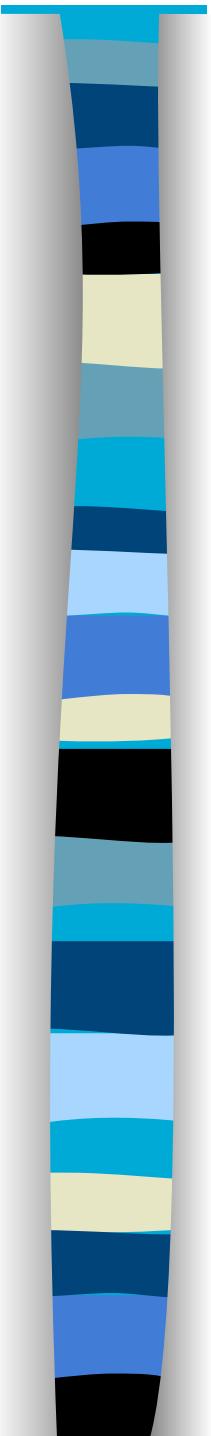


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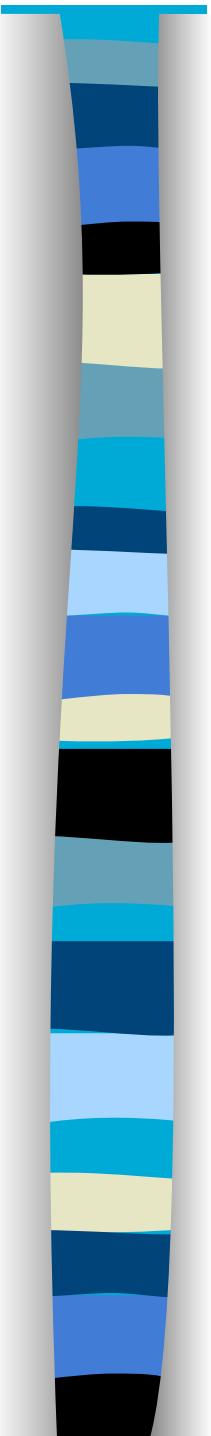


# Benefits

All of the following are benefits of massage for older adults, EXCEPT:

- A. Improved immune function
- B. Decreased appetite
- C. Improved local circulation
- D. Decreased agitation related to Alzheimer's

Q

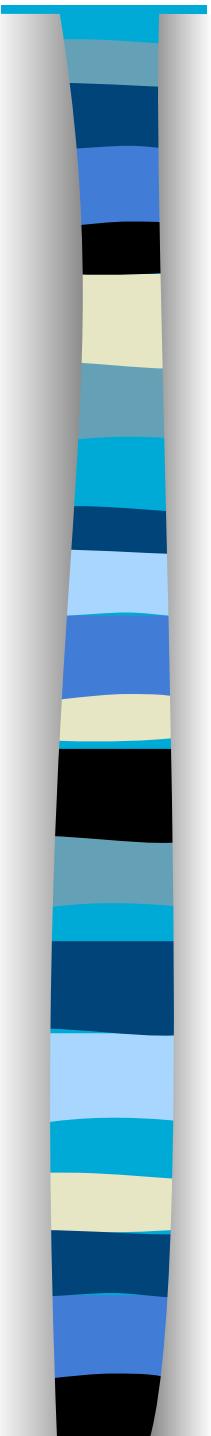


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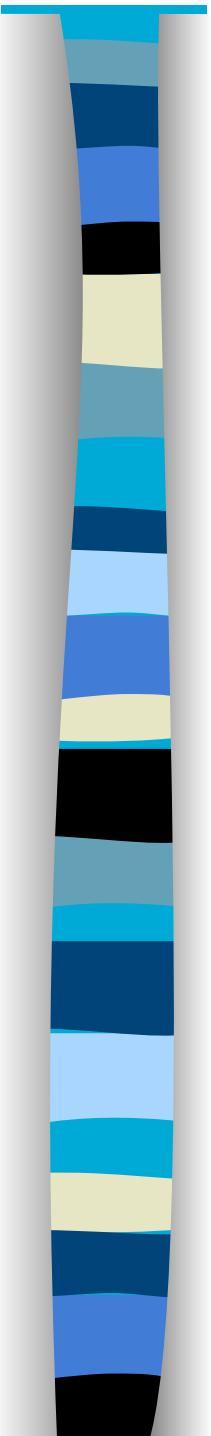


# Benefits

For older adults, massage:

- A. Increases fibroblast production leading to stronger bones and bone health
- B. Prevents changes related to aging and prolongs youthfulness
- C. Helps the body adapt to changes and improves the quality of life
- D. Reverses degeneration of joints leading to decreases in the occurrence of osteoporosis

Q

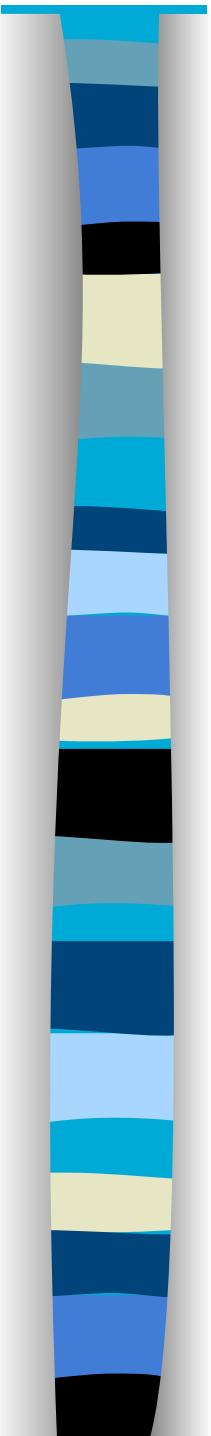


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- C. Helps the body adapt to changes and improves the quality of life**
- D. Reverses degeneration of joints leading to decreases in the occurrence of osteoporosis

A



# Benefits

## Benefits of massage for older adults

- A means of social contact for people who may be dealing with the loss of lifelong friends or a spouse, or feelings of isolation resulting from decreased mobility
- Increased appetite
- Improved local circulation to the skin
- Improved digestion and elimination
- Increased flexibility
- Improved immune function
- Reduced muscle tension
- Pain reduction
- Improved skin condition
- Improved sleep quality
- Decreased stress

## Definition



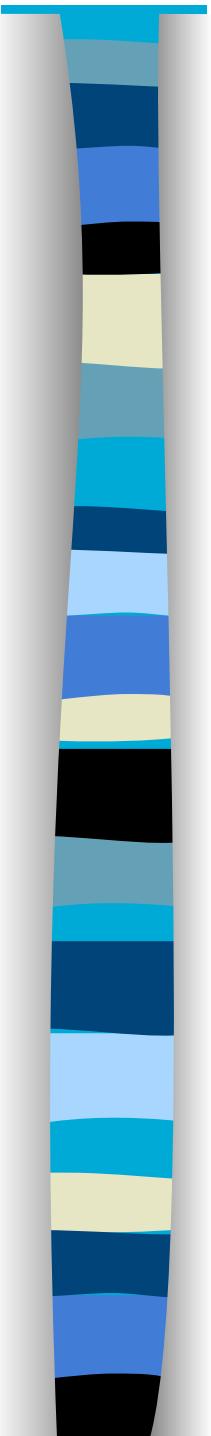




# ABMP Exam Coach

Special Populations:  
Clients over 55

Decubitus Ulcers



# Decubitus Ulcers

## **Decubitus ulcers**

- A type of ulcer caused by impaired circulation to the skin that appears as an open wound that is vulnerable to infection.
- They are commonly called bedsores and are locally contraindicated.

## Definition



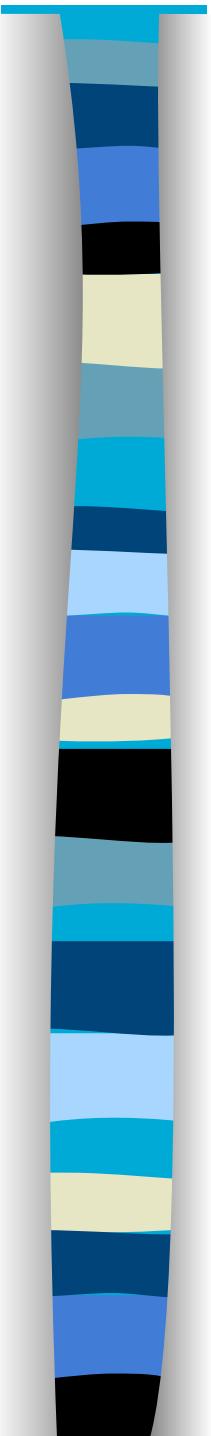




# ABMP Exam Coach

Special Populations:  
Clients over 55

Dementia



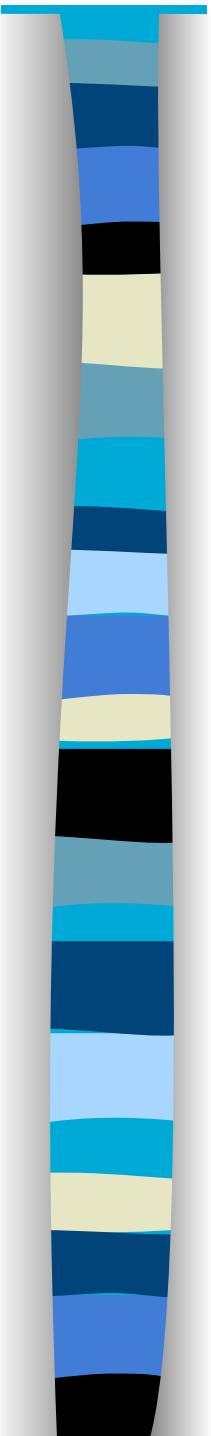
# Dementia

- A group of symptoms caused by the gradual death of brain cells.
- Dementia results in the loss of mental ability severe enough to interfere with normal activities of daily living.
- It leads to memory impairment, loss of reasoning and planning ability, and marked changes in behavior.
- The most common causes:
  - 60-80% due to Alzheimer's
  - 10% due to Vascular dementia (due to a stroke)
  - Dementia with Lewy bodies (abnormal accumulations or bodies of a certain protein)
  - Mixed Dementia
  - Parkinson disease
  - Frontotemporal dementia
  - Creutzfeldt-Jakob disease (human form of mad cow disease)
  - Etc.









# ABMP Exam Coach

Special Populations:  
Clients over 55

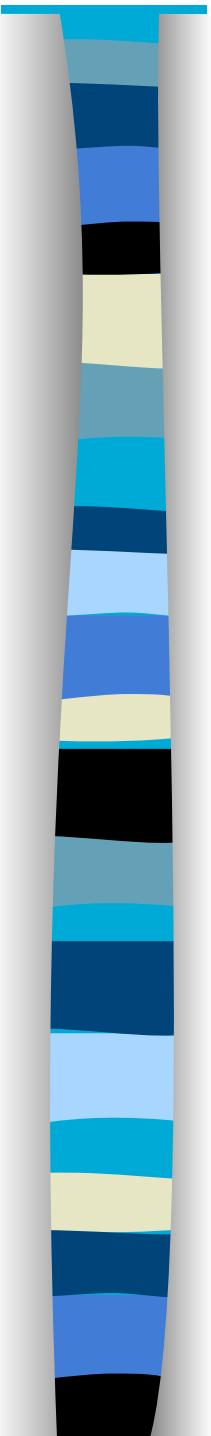
Frail

# Frail

Usually, a frail client will respond best to:

- A. A 60-minute session
- B. A 30-minute session
- C. A 2-hour session
- D. A 90-minute session

Q

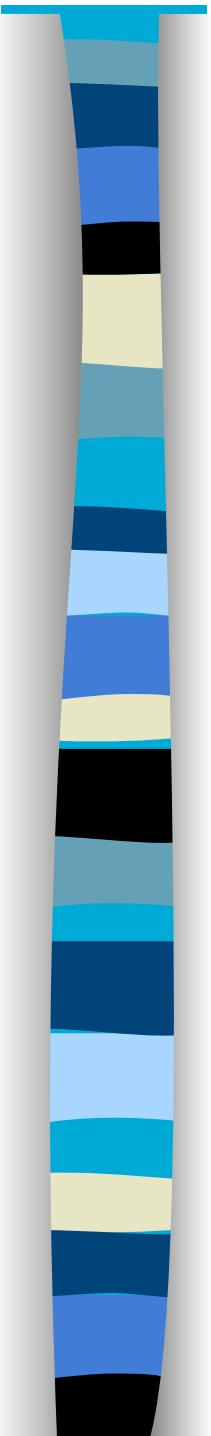


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A



# Frail

## Frail

- A state of physical and/or mental delicacy or weakness that interferes with the ability to independently perform activities of daily living.

# Definition



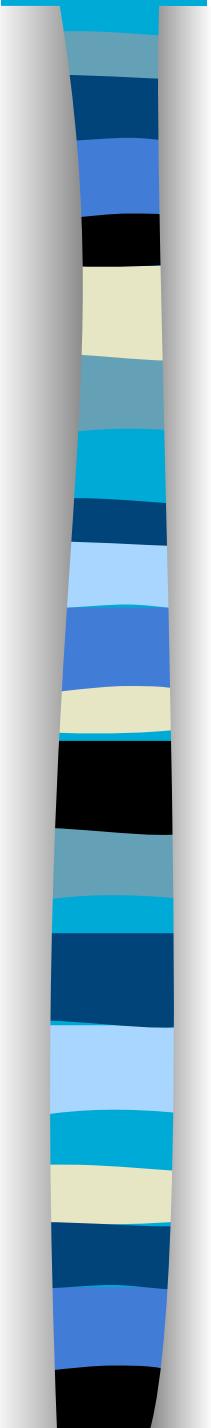




# ABMP Exam Coach

Special Populations:  
Clients over 55

Level of Vitality

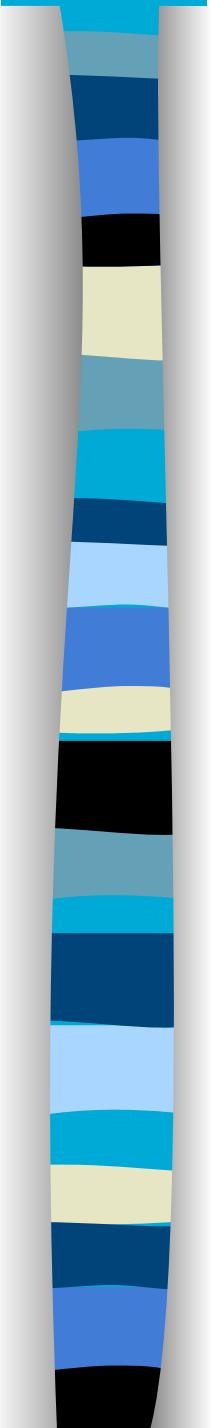


# Level of Vitality

In older adults:

- A. Degenerative changes occur in many joints as bone mass increases
- B. Degenerative changes occur in many joints due to fibromyalgia
- C. Degenerative changes occur in many joints as bone mass decreases
- D. Degenerative changes occur in many joints due to chronic fatigue syndrome

Q

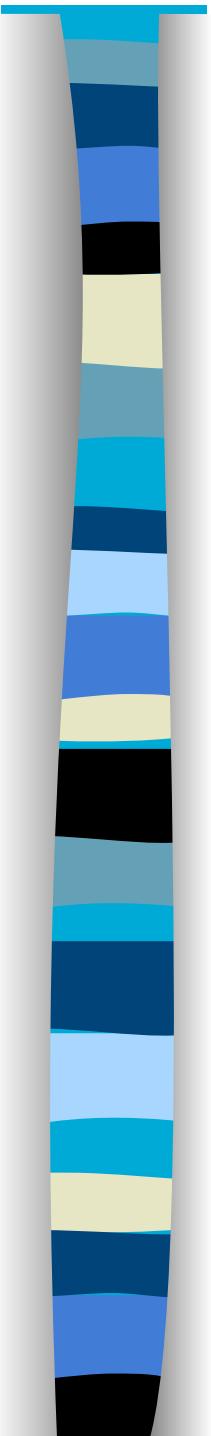


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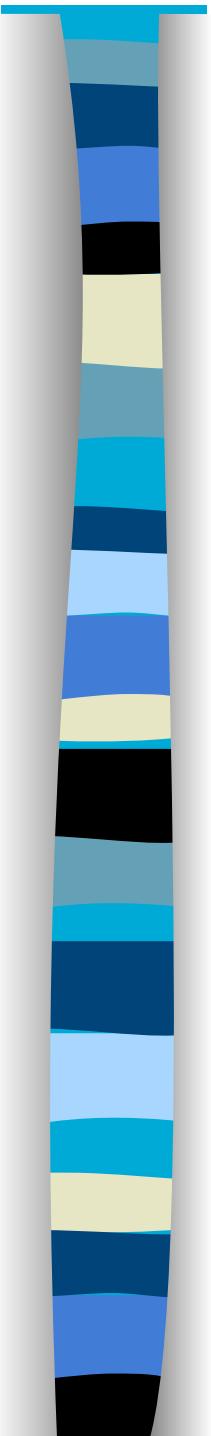


# Level of Vitality

Older adults may have difficulty dressing and undressing for massage. In this case, the practitioner should:

- A. Require a family member be present to undress and dress the client for the session
- B. Work over the client's clothing if he or she is unable to undress
- C. Send the client home if he or she is not attended by a family member who can undress and dress the client for the session
- D. Assist the client to undress to a level of comfort that is acceptable to both the practitioner and the client and simply work over some clothing if necessary



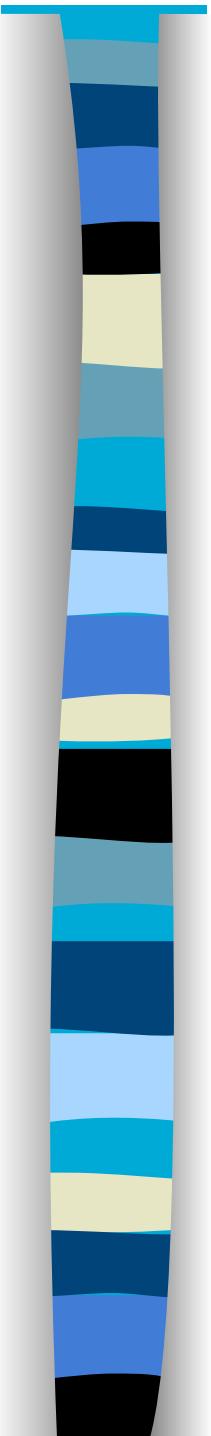


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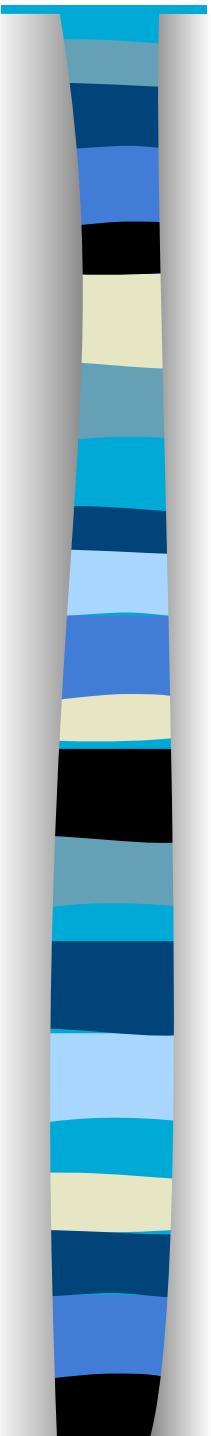


# Level of Vitality

In older adults, functional changes in the gastrointestinal system lead to:

- A. Decreased circulation and lymph flow
- B. Decreased elasticity and tone in facial skin
- C. Digestive and elimination issues
- D. Decreased lung capacity and vital function

Q

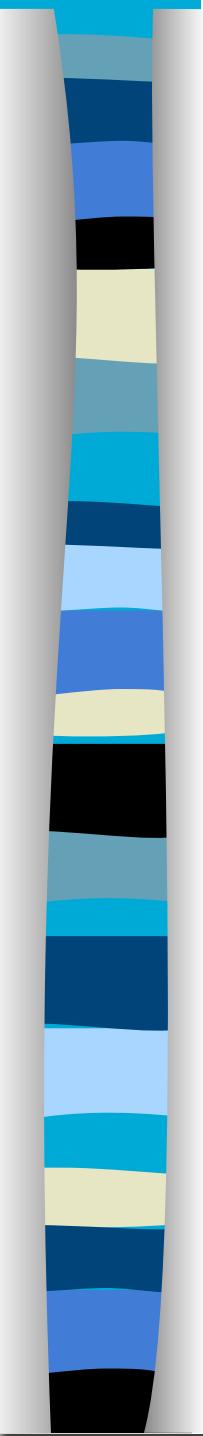


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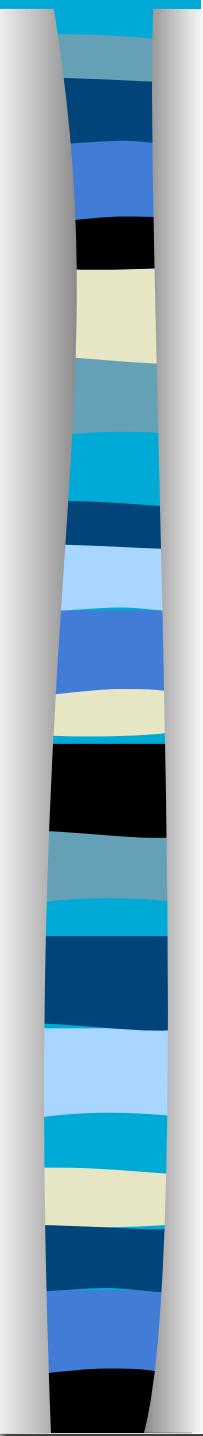


# Level of Vitality

In older adults, lung capacity:

- A. Decreases
- B. Remains stable
- C. Becomes erratic
- D. Increases

Q

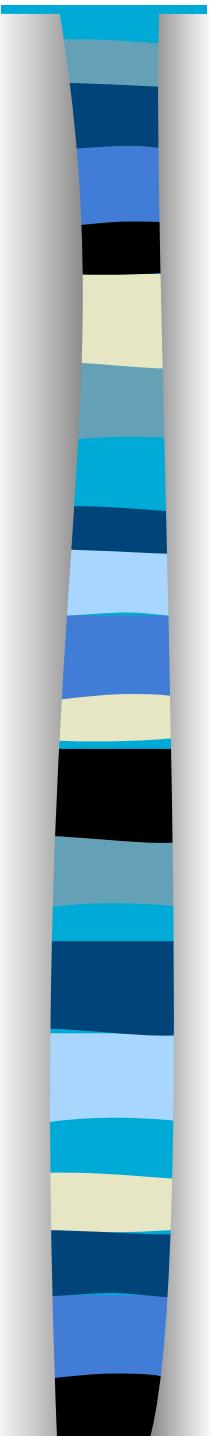


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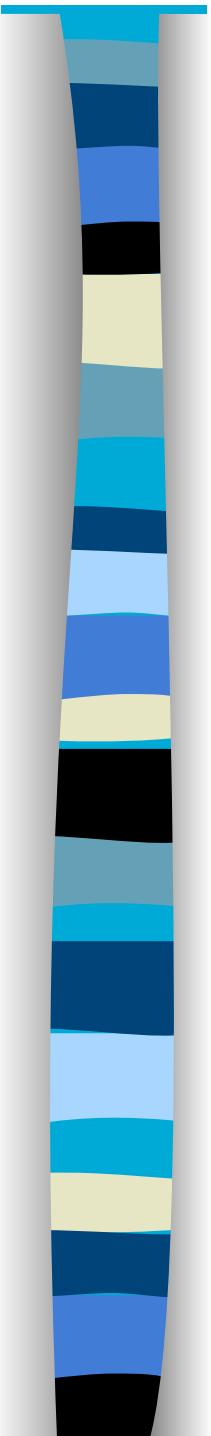


# Level of Vitality

The condition of an older adult's feet can be quite poor. For this reason, the practitioner should:

- A. Soak the feet in a hot foot bath, trim the nails, and file the nails to a smooth edge to improve the condition of the client's feet
- B. Avoid the client's feet entirely so as not to cause the client embarrassment
- C. Clean the feet with warm, moist towels and provide massage to improve circulation and lymph flow, so long as no contraindications exist
- D. Avoid the client's feet entirely so as not to pick up any undetected foot diseases



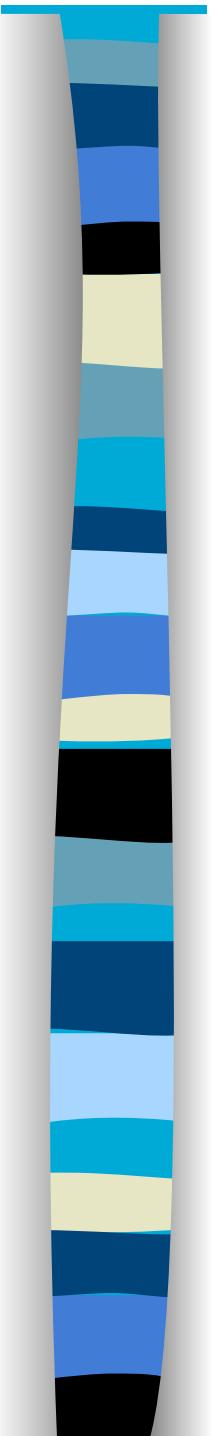


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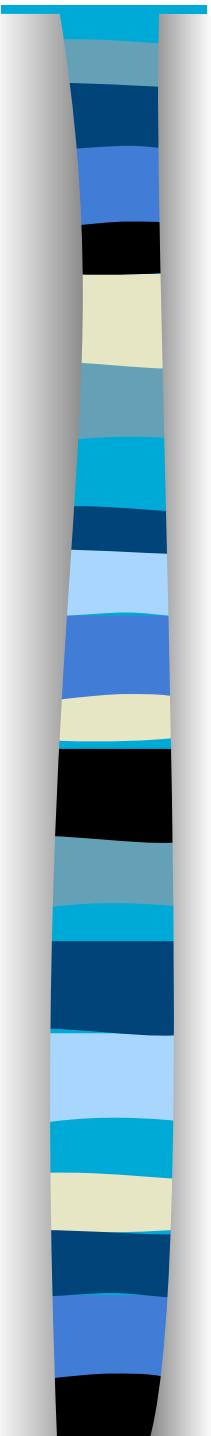


# Level of Vitality

When interacting with older adults remember to:

- A. Speak to attending family members if the client seems too frail to answer health questions easily
- B. Face the client and speak clearly, as many older adults experience some hearing loss
- C. Obtain a health history form, but avoid a health intake interview if the client has hearing loss
- D. Obtain a health history form and physician's release, but avoid a health intake interview if the client seems too frail to answer health questions easily



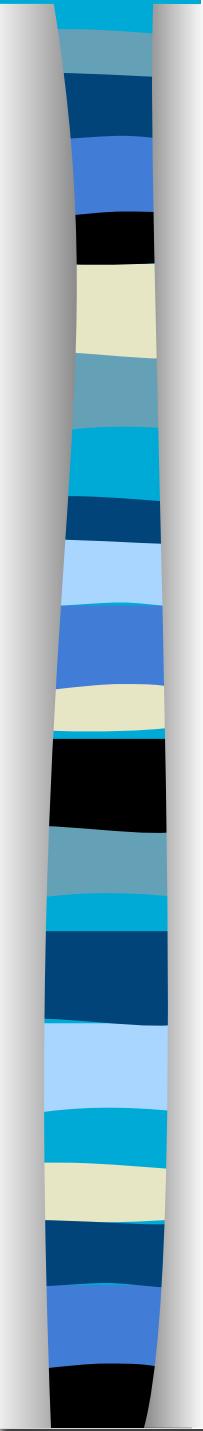


# Level of Vitality

When interacting with older adults remember to:

- A. Speak to attending family members if the client seems too frail to answer health questions easily
- B. Face the client and speak clearly, as many older adults experience some hearing loss**
- C. Obtain a health history form, but avoid a health intake interview if the client has hearing loss
- D. Obtain a health history form and physician's release, but avoid a health intake interview if the client seems too frail to answer health questions easily

A



# Level of Vitality

## Level of vitality in older adults

- The variation of energy and "life" exhibited
- Every older adult is unique, and the age span of this population ranges from 60–100
- Some clients will look far younger than their years and are healthy, physically active, energetic, and mentally sharp.
- Others look their chronological age, have decreased physiological functioning, and may show signs of mental deterioration.

## Definition



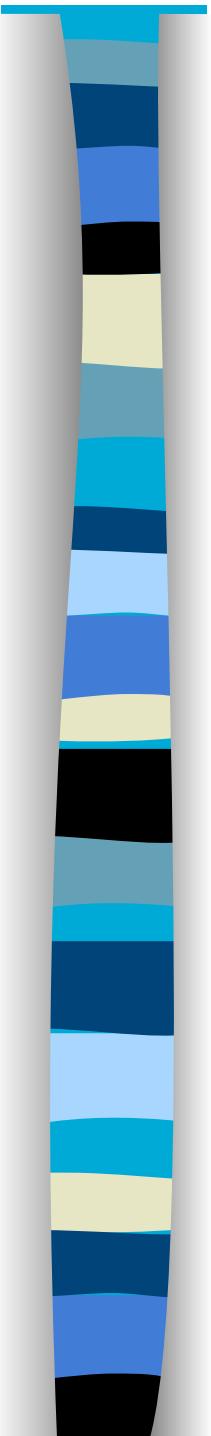




# ABMP Exam Coach

Special Populations:  
Clients over 55

Massage Cautions

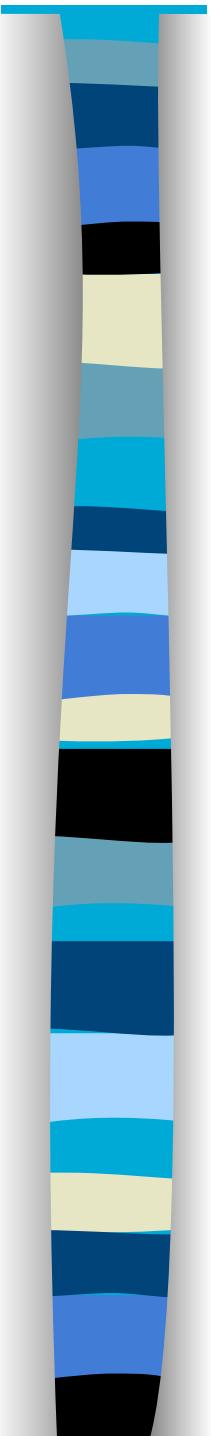


# Massage Cautions

When providing massage to older adults, it is important to remember that:

- A. Most older adults are on medications that require significant adaptations in the massage application
- B. Every older adult is unique and the depth and vigor of the massage is based on the client's individual level of health and vitality
- C. Most older adults do not require modification or adaptations to massage application
- D. Every older adult experiences health-related conditions that require the massage be adapted so that it is lighter and less vigorous



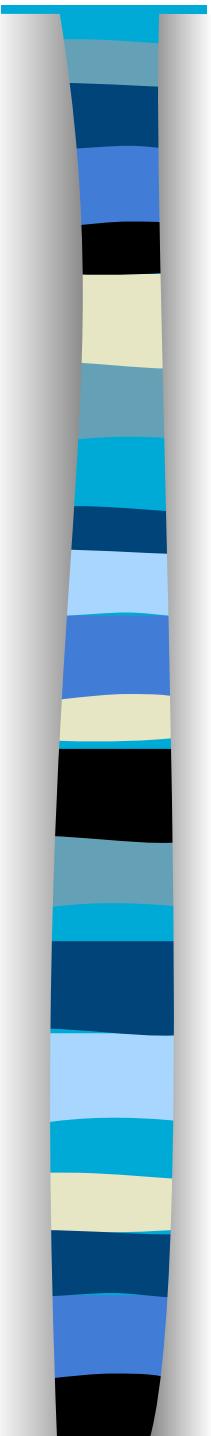


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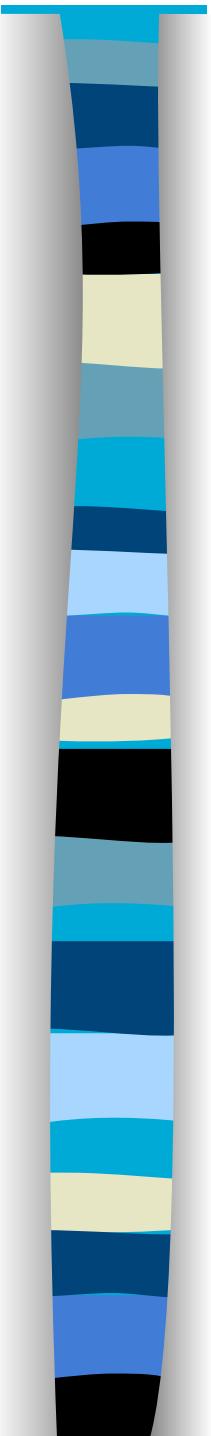


# Massage Cautions

If the client's skin is frail and delicate, avoid techniques like:

- A. Myofascial release
- B. Effleurage strokes
- C. Relaxation massage
- D. Facial massage

Q

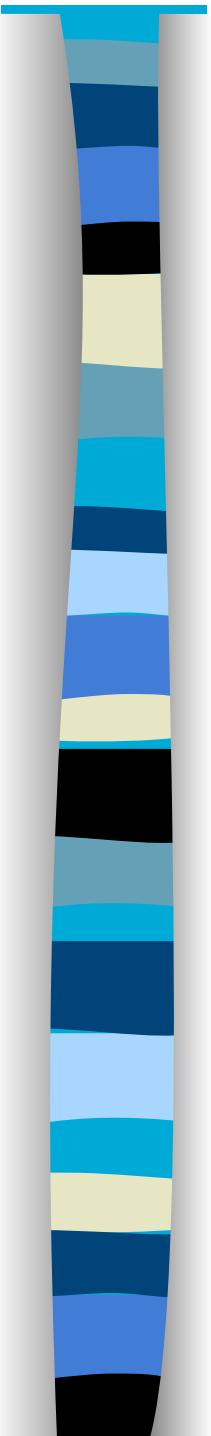


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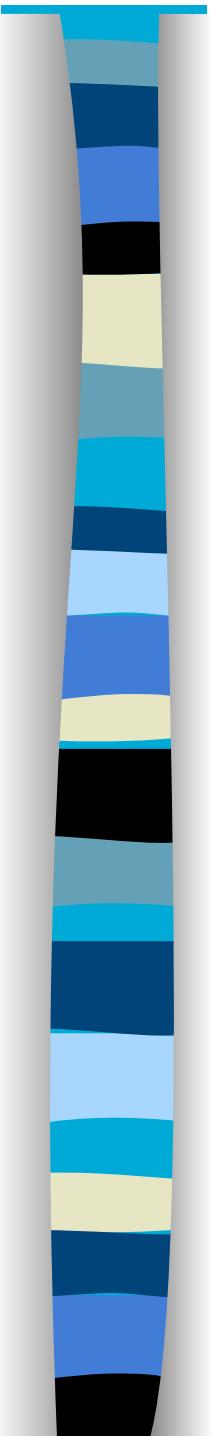


# Massage Cautions

In older adults:

- A. Degenerative changes occur in many joints as bone mass increases
- B. Degenerative changes occur in many joints due to fibromyalgia
- C. Degenerative changes occur in many joints as bone mass decreases
- D. Degenerative changes occur in many joints due to chronic fatigue syndrome

Q

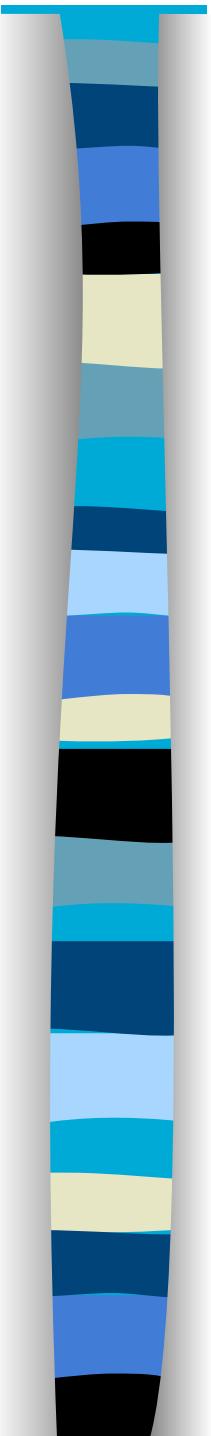


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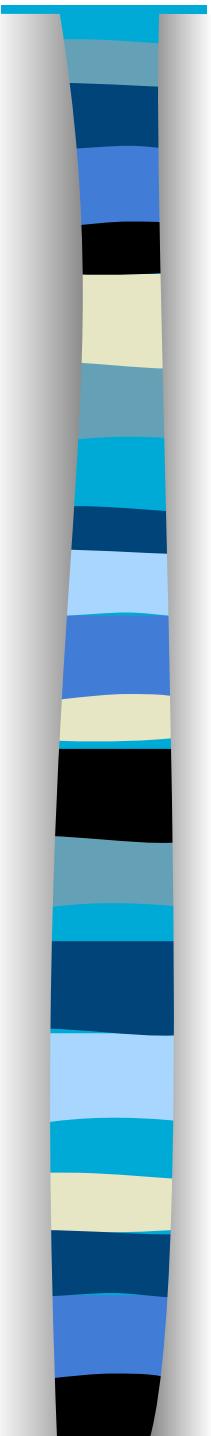


# Massage Cautions

Massage cautions for older adults

- A massage for an older adult will be based on the individual client's level of vitality and health
- Healthy, robust, older adults should receive the same type of massage as any middle-aged client
- Clients who are frail and in a weakened condition will require massage adaptations.

## Definition



# Massage Cautions

Massage cautions for older adults

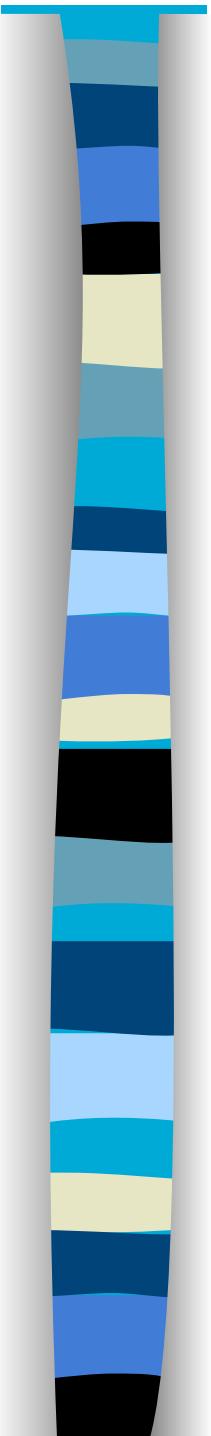
- Use a thorough health history intake process to gather a complete picture of the client's health.
- Obtain a physician's release for older adults who demonstrate decreased physiological or psychological function due to aging.
- Typically, frail clients cannot tolerate long sessions and do better with shorter timeframes.
- Also, be ready to assist an older client at all times before, during, and after the session by helping them exit or enter a car, open a heavy entrance door, or get on and off the massage table.

## Definition





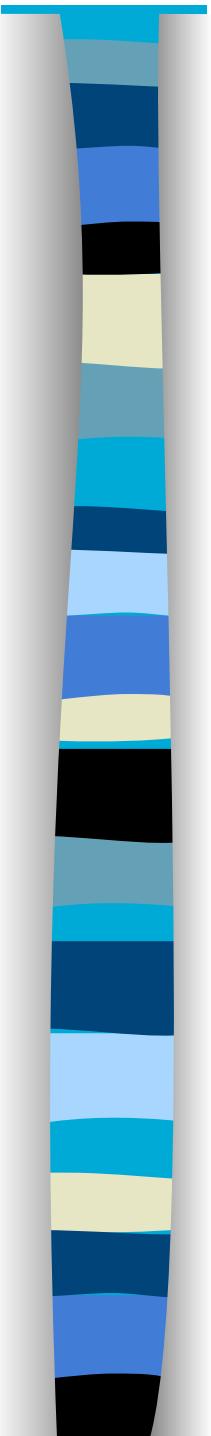




# ABMP Exam Coach

Special Populations:  
Clients over 55

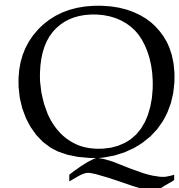
Older Adult

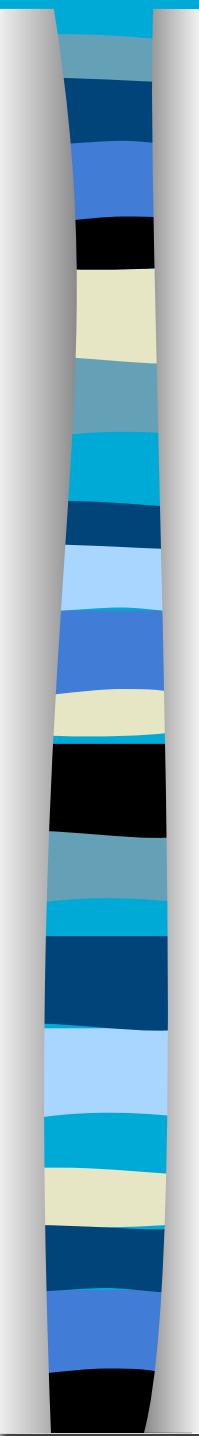


# Older Adult

To ensure that your massage is safe for an older adult:

- A. Conduct a thorough health history intake process and ask the client about the use of vitamins, herbs, and other health-care supplements
- B. Assume the client is healthy and robust and proceed with your normal massage
- C. Assume the client is likely on blood thinners or heart medications and adapt the massage to be less vigorous without embarrassing the client with too many questions
- D. Conduct a thorough health history intake process and ask the client about the use of blood thinners, history of blood clots, and any current or past heart conditions



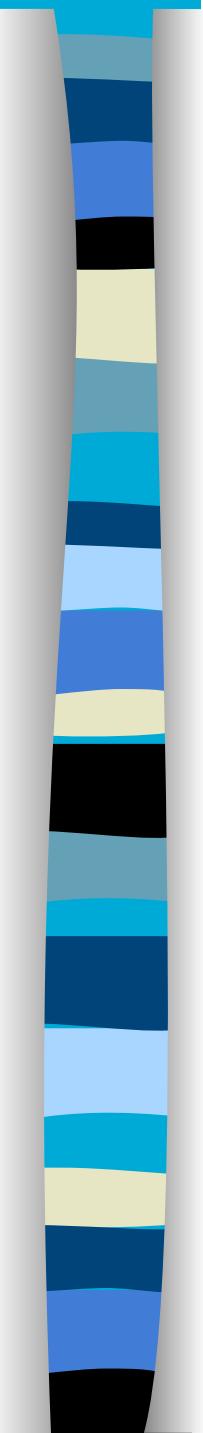


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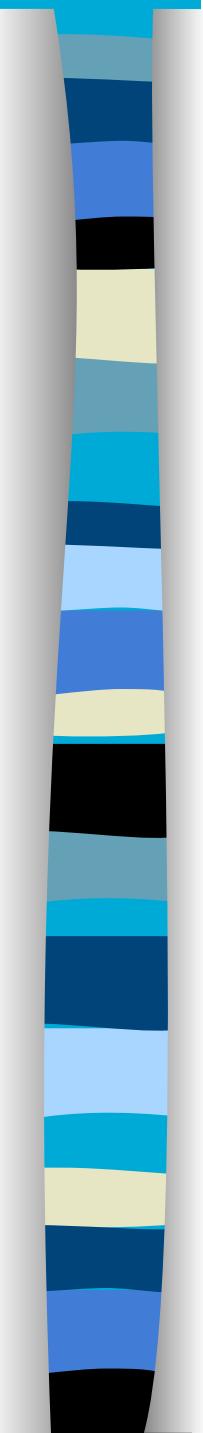


# Older Adult

To minimize negative connotations related to age, health-care professionals now use the phrase:

- A. Geriatric
- B. Older adult
- C. Elderly
- D. Senior citizen

Q

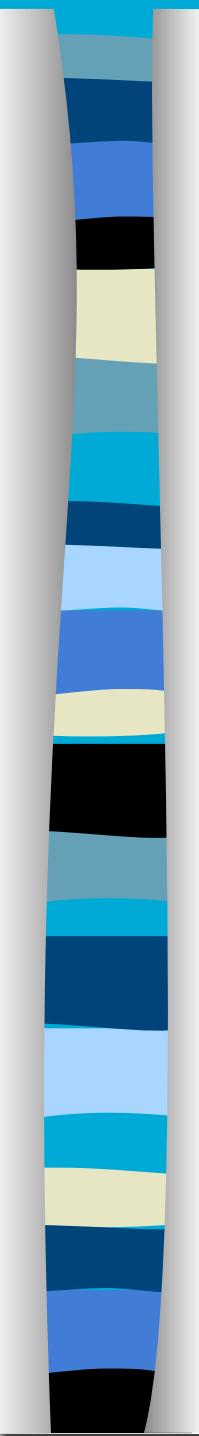


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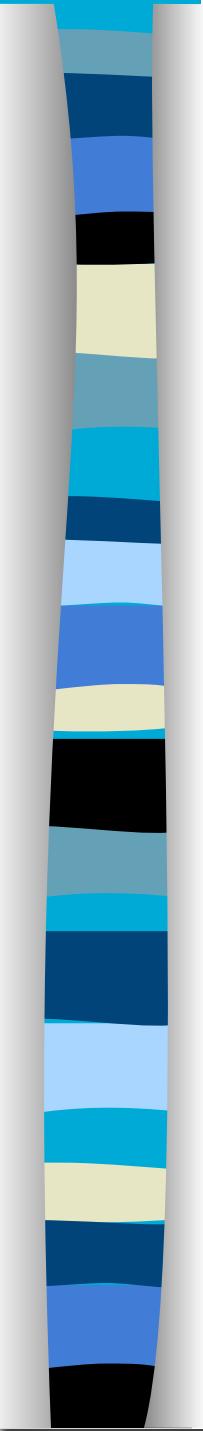


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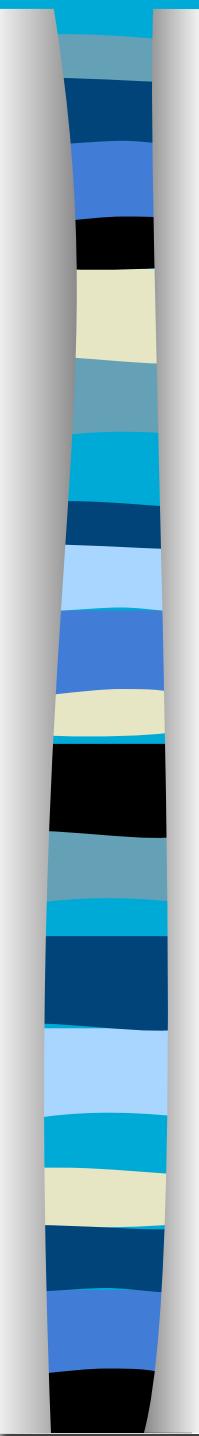


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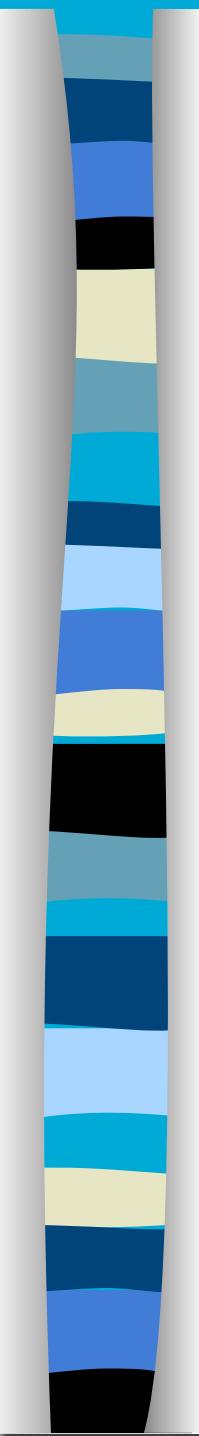


# Older Adult

Older adults may not fully inform practitioners of certain conditions if their psychological functioning is decreased. Practitioners should be especially watchful for:

- A. Good flexibility, which suggests that ligaments have gone lax
- B. Bedsores, arthritic joints, and varicose veins
- C. Increased appetite, which suggests the digestive system has been stimulated unnecessarily
- D. Increased sleepiness, which could indicate an impending loss of consciousness

Q

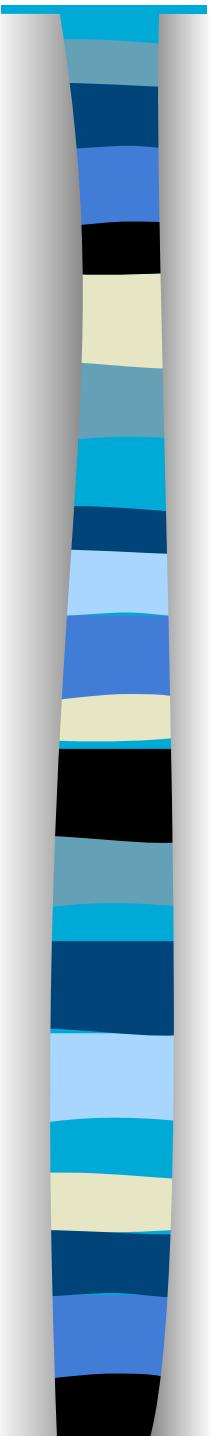


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# Older Adult

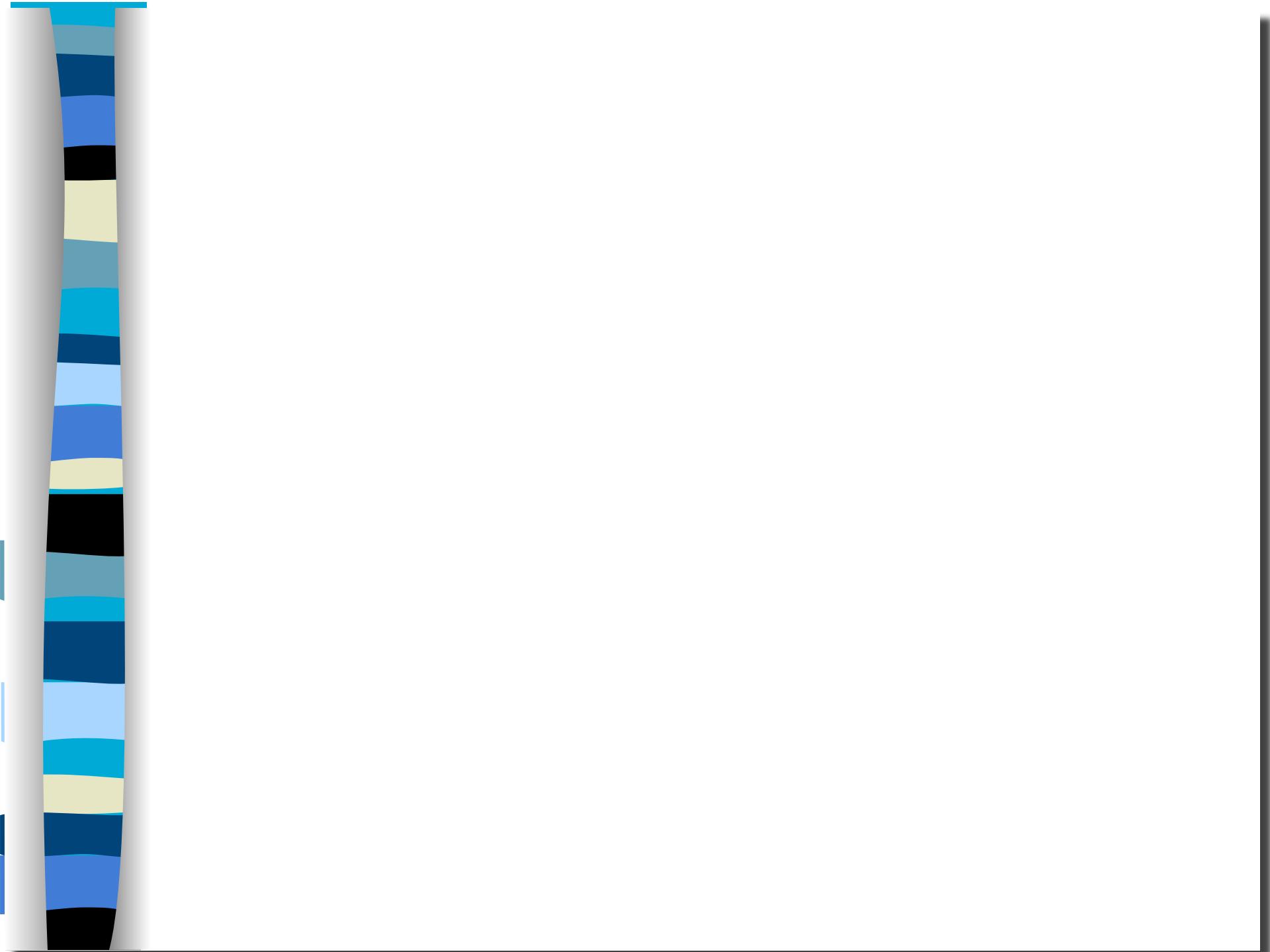
## Older adult

- The term preferred by health-care providers to describe patients / clients who are 60 years of age and older
- The term has replaced the use of the terms "senior citizen" and "geriatric," because these terms have negative connotations for many people.
- The term "elderly" is sometimes used to indicate a person of advancing age who is frail.

## Definition



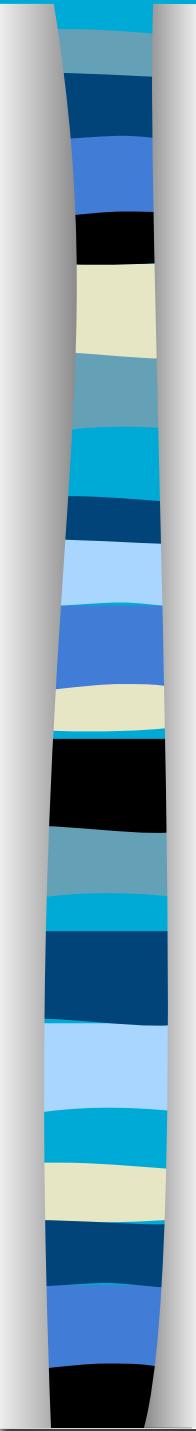




# ABMP Exam Coach

Special Populations:  
Clients over 55

Orthostatic Hypotension

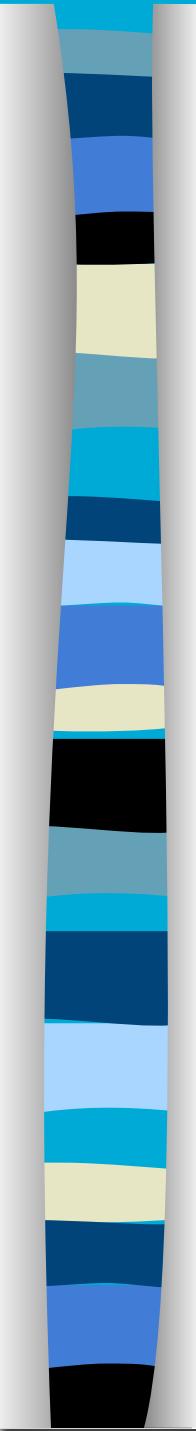


# Orthostatic Hypotension

Orthostatic hypotension is:

- A. A sudden drop in lymph flow
- B. A sudden obstruction of breathing
- C. A sudden loss of bladder function
- D. A sudden drop in blood pressure

Q

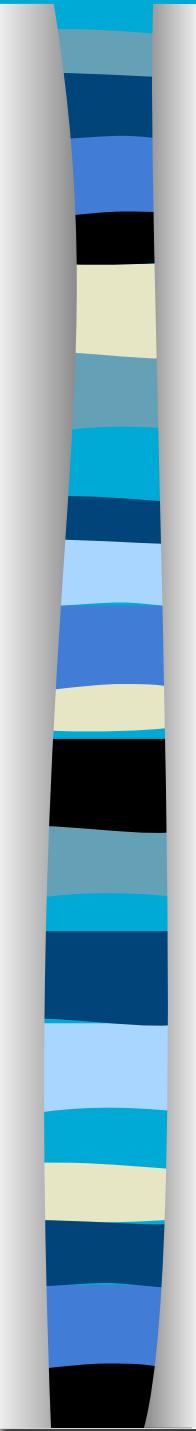


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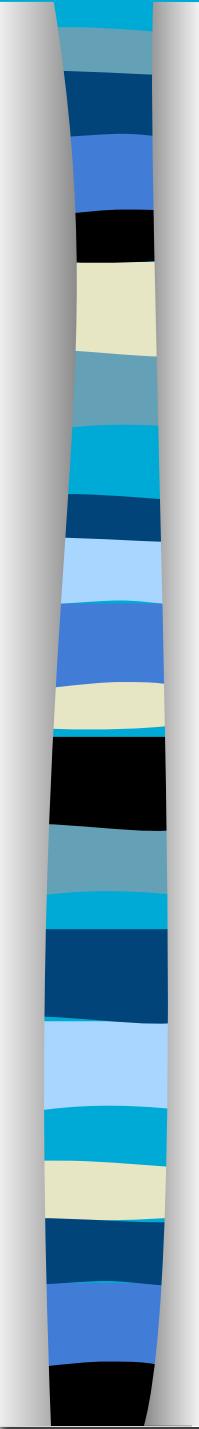


# Orthostatic Hypotension

One way to prevent safety issues caused by orthostatic hypotension is to:

- A. Position the client in a prone position for the last 5 minutes of the session
- B. Position the client in a side-lying position for the last 5 minutes of the session
- C. Position the client in a seated position for the last 5 minutes of the session
- D. Position the client in a supine position for the last 5 minutes of the session



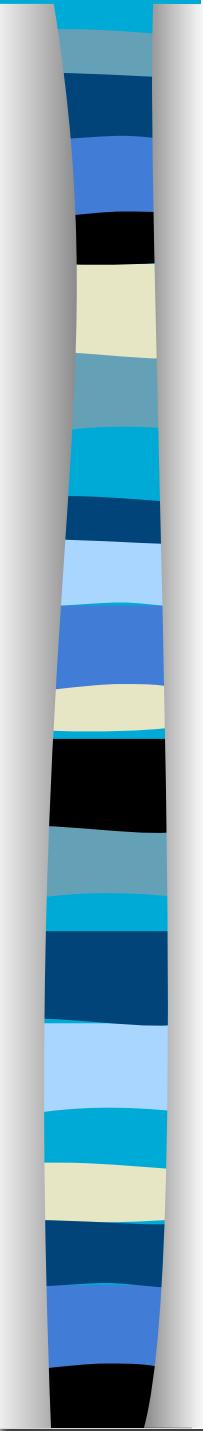


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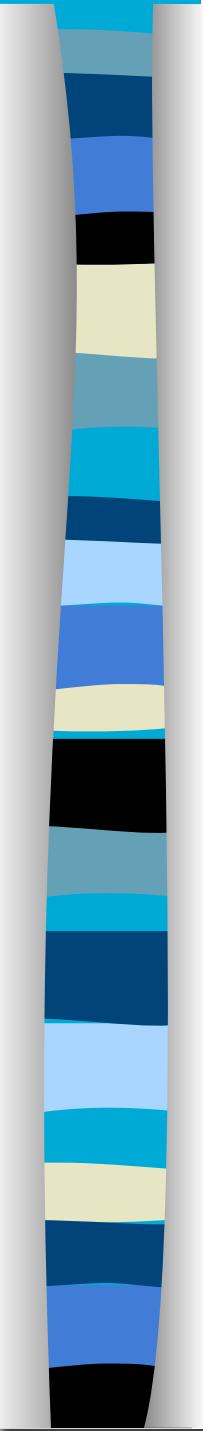


# Orthostatic Hypotension

When moving from a reclining position to a seated or standing position, an older adult may experience:

- A. Orthostatic hypotension
- B. Osteoarthritis
- C. Osteomyalgia
- D. Osteoporosis

Q

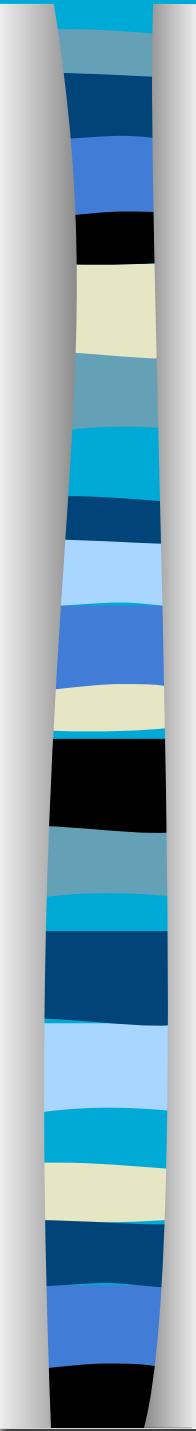


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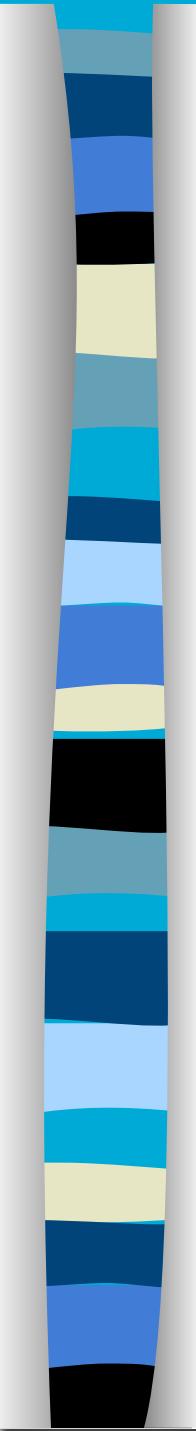


# Orthostatic Hypotension

Orthostatic hypotension is caused by:

- A. Deep massage work on arthritic joints
- B. Moving from a reclining position to a seated or standing position
- C. Deep massage work on frail blood vessels
- D. Moving from a seated or standing position to a reclining position

Q

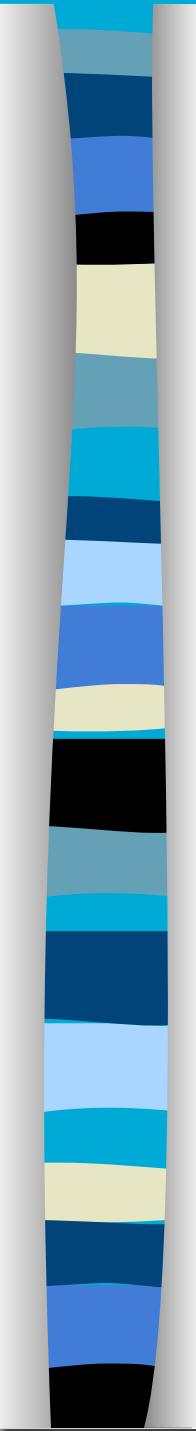


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- C. Deep massage work on frail blood vessels
- D. Moving from a seated or standing position to a reclining position

A



# Orthostatic Hypotension

**Orthostatic hypotension, AKA: postural hypotension**

- The sudden drop in blood pressure an older adult might experience upon moving from a reclining position to a seated or standing position
- Position the client in a seated position for the last 5 minutes of the session if orthostatic hypotension is an issue.

## Definition



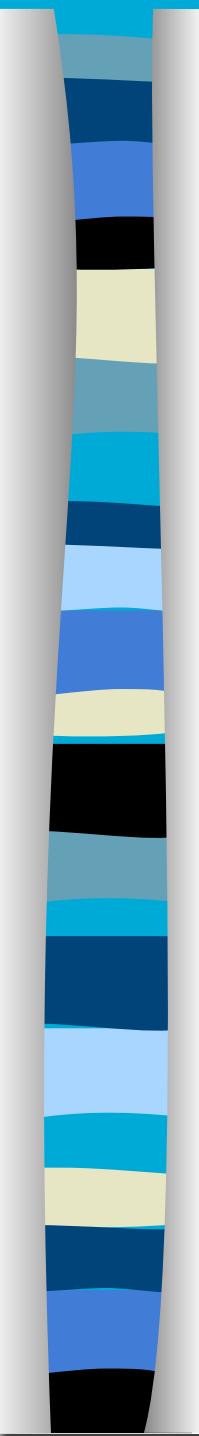




# ABMP Exam Coach

Special Populations:  
Clients over 55

Parkinson's Disease



# Parkinson's

## Parkinson's disease

- A progressive neurologic disease caused by degeneration of the brain's basal ganglia and low production of the neurotransmitter dopamine
- It is characterized by:
  - An inexpressive face
  - Tremors
  - Slow movements
  - A gait with shortened steps
  - Postural changes
  - Difficulty with balance
  - Decreased coordination
  - Muscle weakness.

## Definition



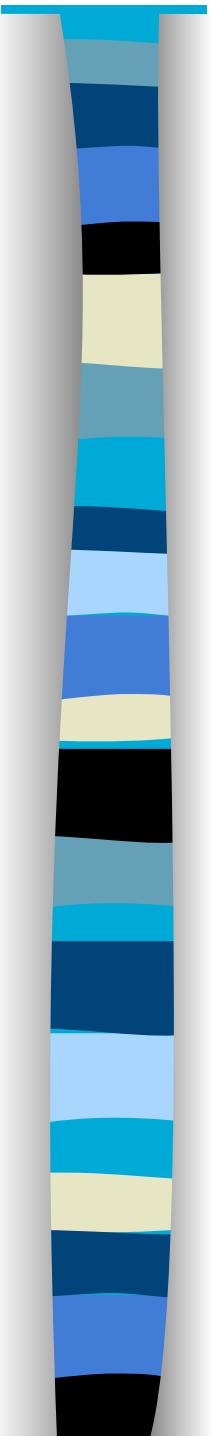




# ABMP Exam Coach

Special Populations:  
Clients over 55

Stroke



# Stroke

## Stroke, AKA: cerebrovascular accident or CVA

- A condition that results in a loss of brain function due to a disturbance in the blood supply to the brain, most often caused by a blockage (e.g., blood clot) or internal hemorrhage.
- As a result, the affected area of the brain cannot function normally, which may result in an inability to move one or more limbs on one side of the body, failure to understand or formulate speech, or a visual impairment.

# Definition







# ABMP Exam Coach

Special Populations:  
Clients over 55

Vigor

# Vigor

**Vigor** A state of physical and mental strength, energy, and force.

# Definition



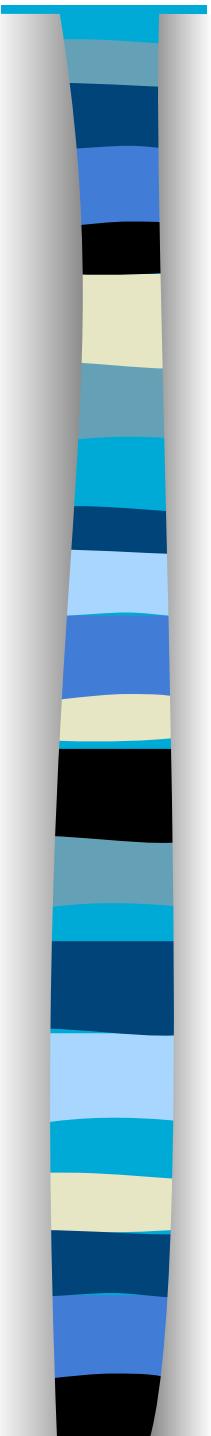




# ABMP Exam Coach

Special Populations:  
Clients who are Obese

Basic Terminology

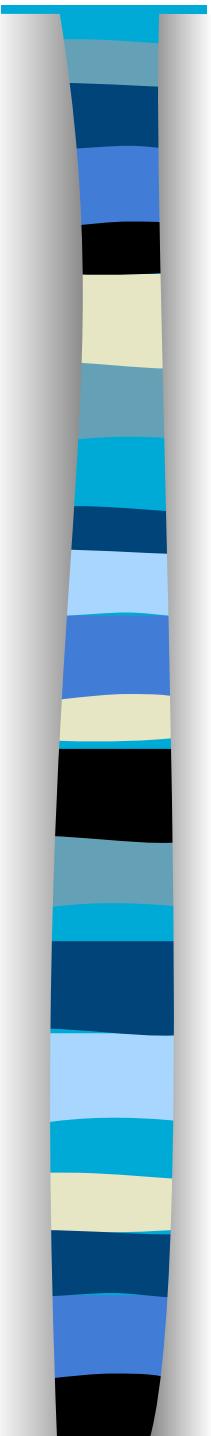


# Basic Terminology

With a body mass index of 30 or higher, a person is:

- A. Below weight
- B. Overweight
- C. At a healthy weight
- D. Obese

Q

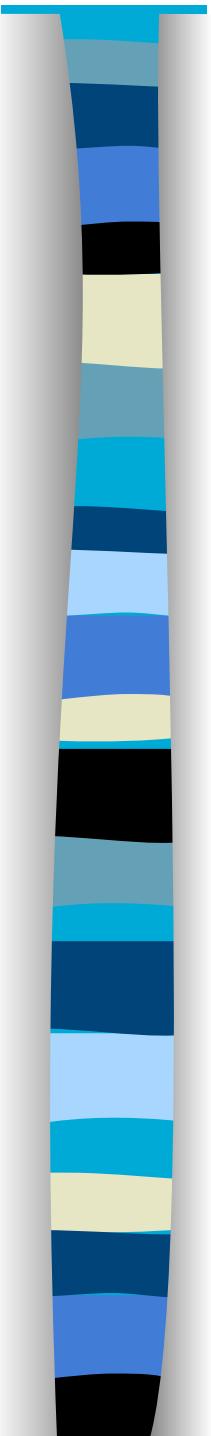


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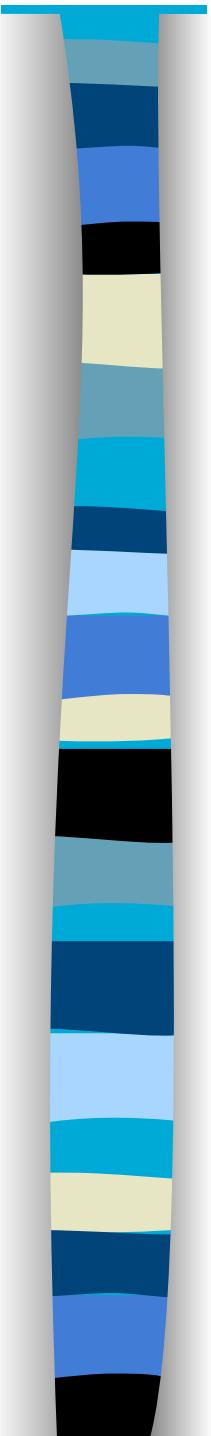


# Basic Terminology

Obesity is defined as:

- A. An excessive amount of body fat in relation to lean body mass
- B. An excessive amount of body fat in relation to body collagen and elastin
- C. An excessive amount of lean body mass in relation to body fat
- D. An excessive amount of body mass in relation to collagen and elastin

Q

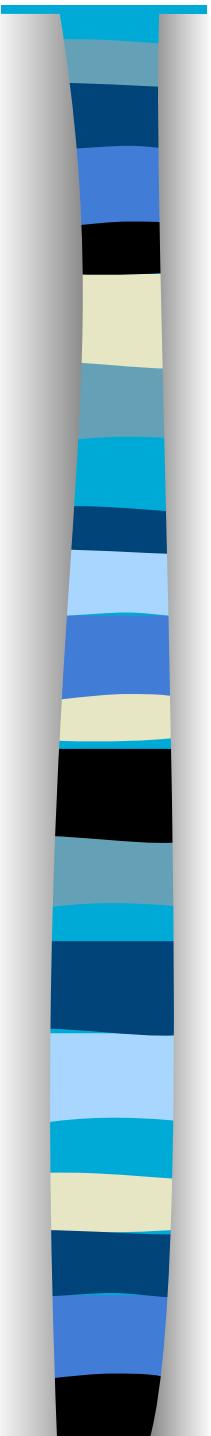


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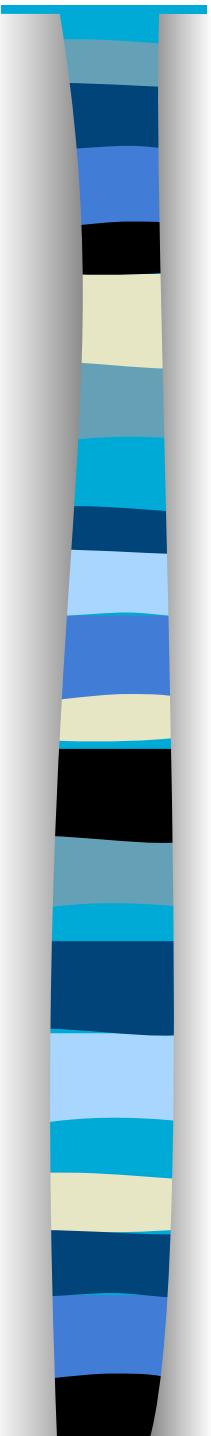


# Basic Terminology

With a body mass index of 25–29.9, a person is:

- A. Obese
- B. Below weight
- C. Overweight
- D. At a healthy weight

Q

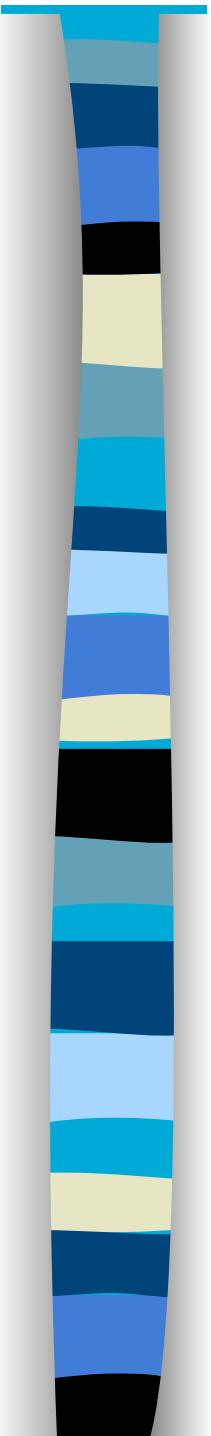


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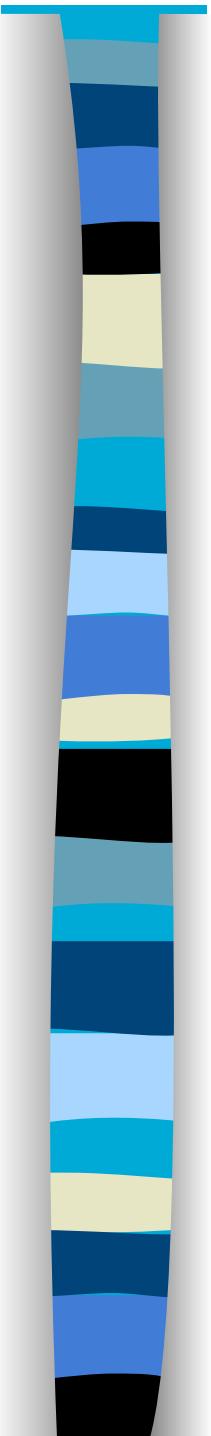


# Basic Terminology

The ratio of fat to lean body mass is called:

- A. Genetic predisposition
- B. Body composition
- C. Obesity
- D. Lifestyle factors

Q

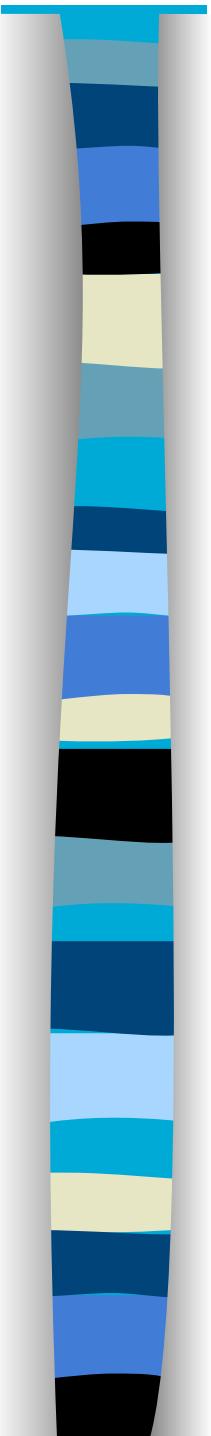


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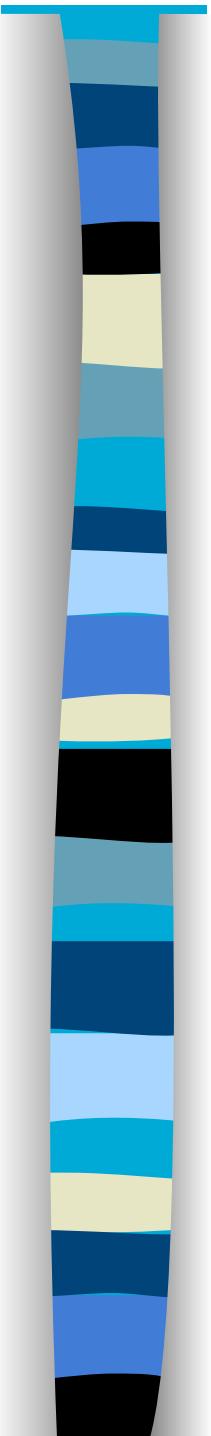


# Basic Terminology

A calculation of body composition involving the ratio of fat to lean body mass is:

- A. Adipose muscle index
- B. Body fat index
- C. Body mass index
- D. Fixed body mass

Q

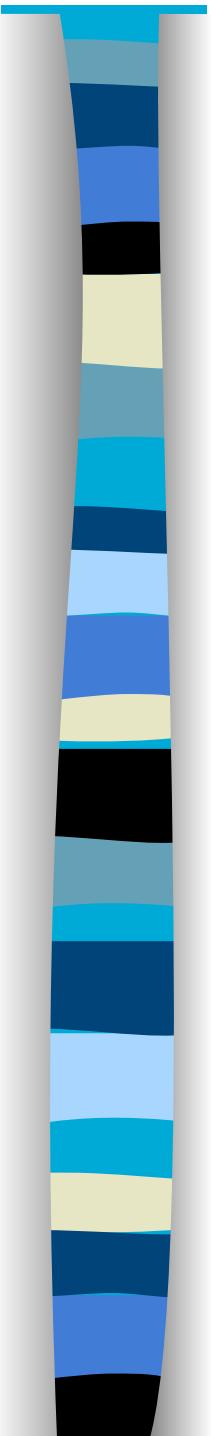


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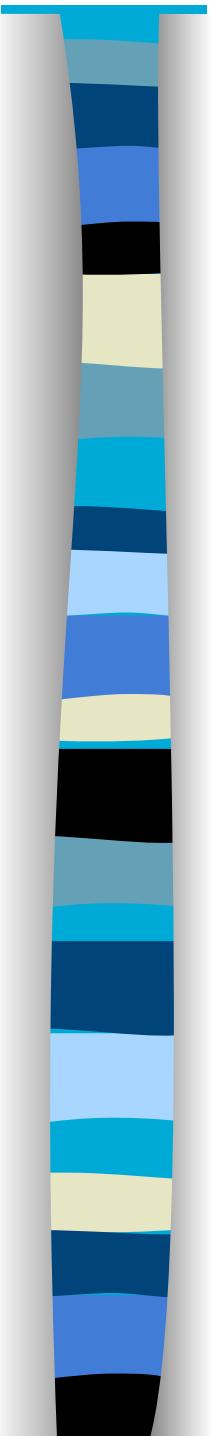


# Basic Terminology

The mass of the body without fat is referred to as:

- A. Optimal body mass
- B. Original body mass
- C. Fixed body mass
- D. Lean body mass

Q



# Basic Terminology

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A

# Obese

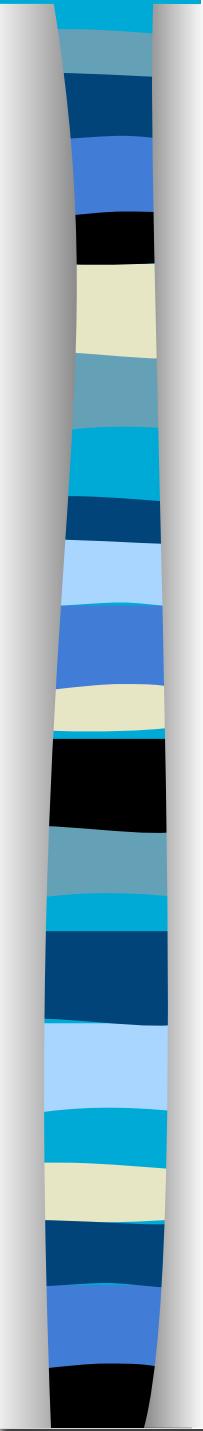
**Obese** According to body mass index and the National Institutes for Health, a person is obese if he or she has a BMI of 30 or higher. For example, a person who is 5' 5" and weighs 180 or more pounds is considered obese.

# Definition

# Obesity

**Obesity** The condition of being obese; an excessive amount of body fat in relation to lean body mass.

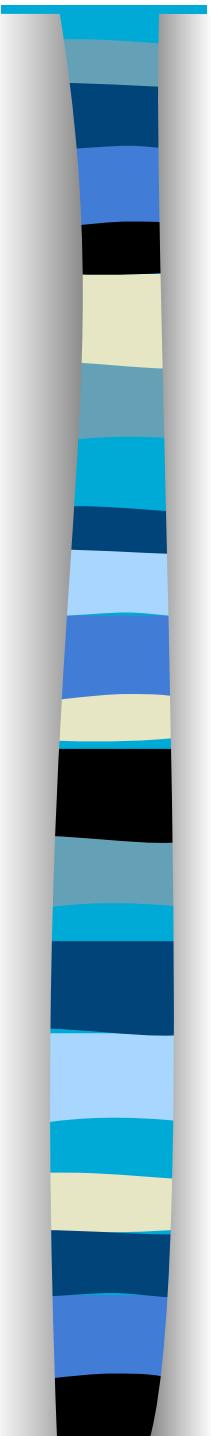
# Definition



# Overweight

**Overweight** According to body mass index and the National Institutes for Health, a person is overweight if he or she has a BMI of 25–29.9. For example, a person who is 5' 5" and weighs 150–174 pounds is considered overweight.

## Definition



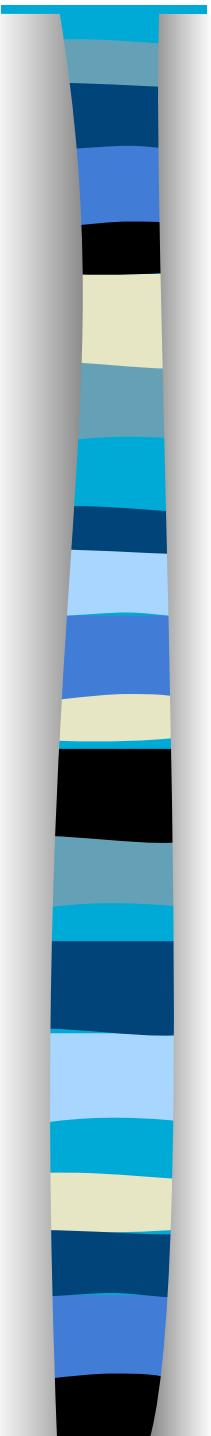
# Adipose Tissue

**Adipose tissue** Body fat; a loose connective tissue composed mostly of adipocytes. Its main role is to:

- Store energy in the form of lipids
- Cushion structures
- Insulate the body

Practitioners must be cautious when working with areas where adipose deposits are particularly excessive because this tissue tends to be highly vascular and may be prone to bruising. For this reason, when providing massage to clients who are obese, avoid pushing through adipose tissue to access muscle.

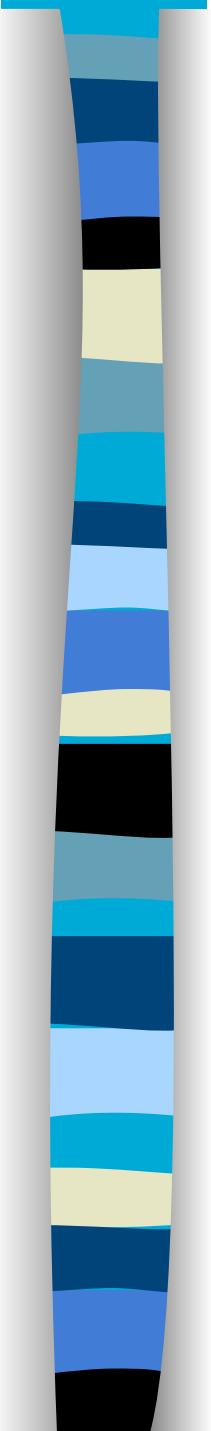
## Definition



# Body Composition

**Body composition** The ratio of fat to lean body mass. It is calculated based on the weight and height of an individual and is commonly determined using a body mass index.

## Definition



# Body Fat

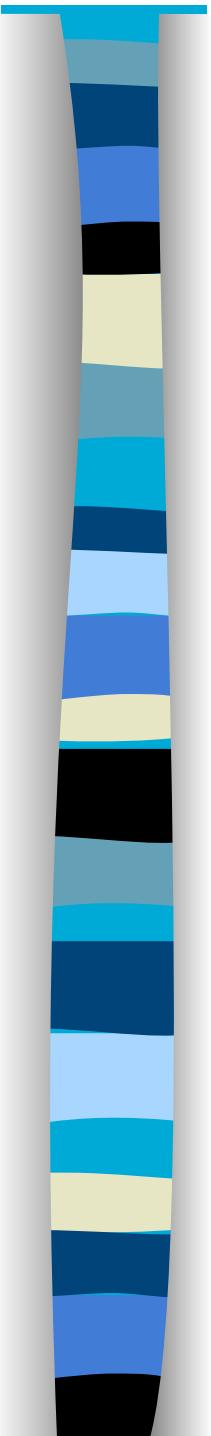
**Body fat** The amount of adipose tissue in an individual body; the percentage of a person's body that is not composed of water, muscle, bone, and vital organs.

## Definition

# Body Mass Index

**Body mass index** A key for relating weight to height in order to determine if a person is a healthy weight. The formula measures a person's weight in kilograms, divided by his or her height in meters squared.

## Definition



# Lean Body Mass

**Lean body mass** The mass of the body without fat; the percentage of a person's body composed of water, muscle, bone, and vital organs.

## Definition

# Genetic Predisposition

**Genetic predisposition** Inherited tendencies or inclinations that make a person more susceptible to health problems.

## Definition

# Lifestyle

**Lifestyle** The set of habits and customs unique to a person that lend consistency to activities, behaviors, manners of coping, motivation, and thought processes, and define the way in which he or she lives including diet, level of physical activity, substance use (e.g., tobacco or alcohol), and social and personal interactions.

# Definition



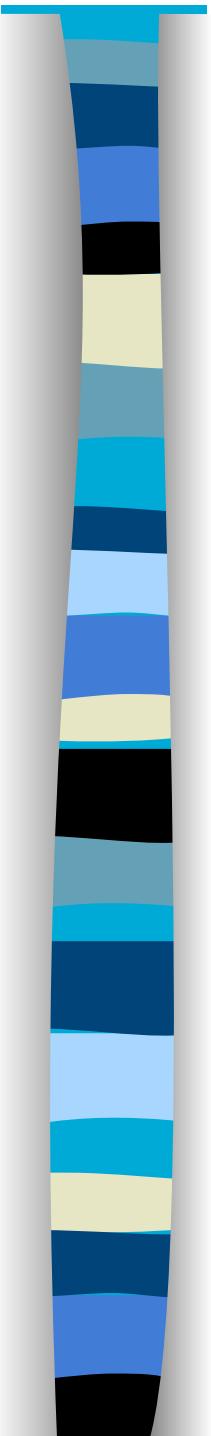




# ABMP Exam Coach

Special Populations:  
Clients who are Obese

Causes

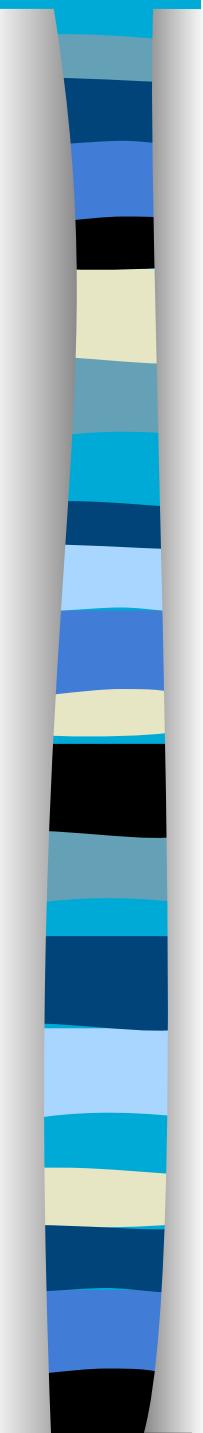


# Causes

According to research, a significant factor that contributes to obesity is:

- A. A history of being underweight as a child
- B. A history of participation in higher education
- C. A history of osteoporosis
- D. The level of access a person has to safe places to exercise



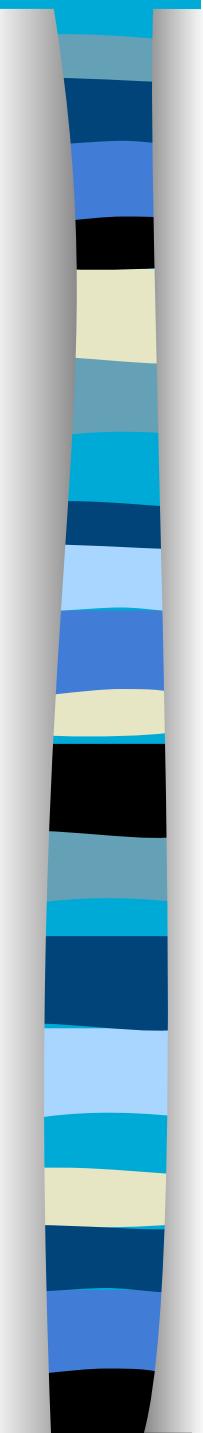


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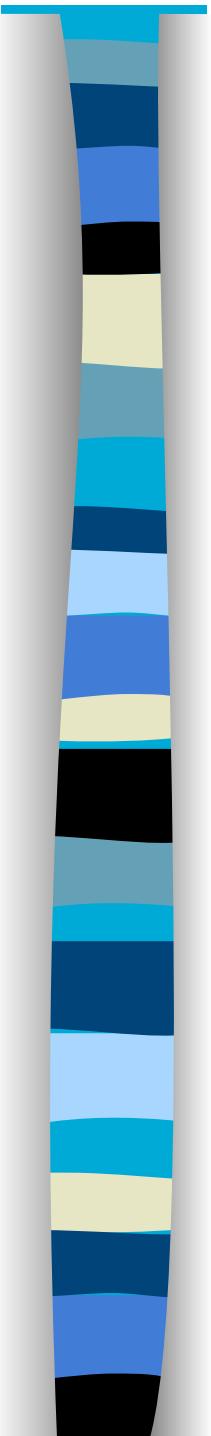


# Causes

According to research, a significant factor that contributes to obesity is:

- A. History of being underweight as a child
- B. History of cancer
- C. Lifestyle choices
- D. Use of blood-thinning medications

Q

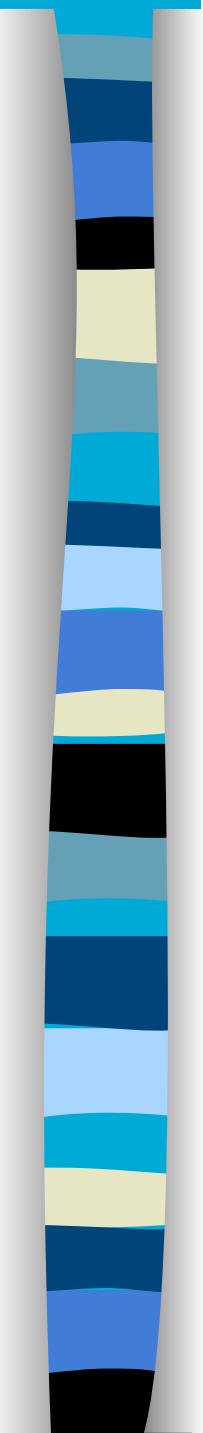


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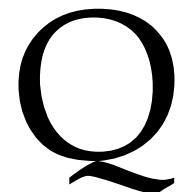
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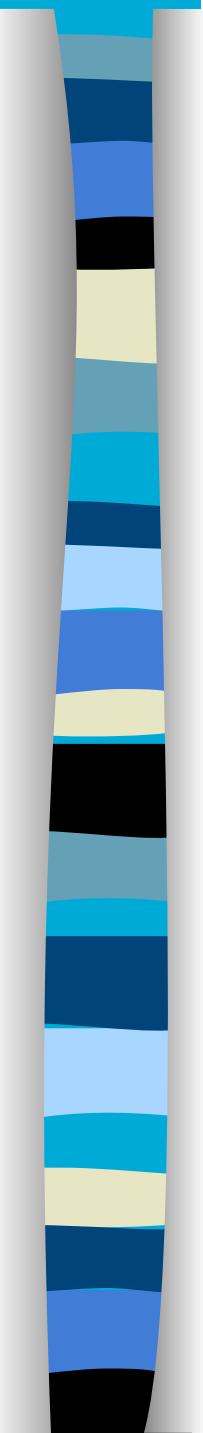


# Causes

According to research, a significant factor that contributes to obesity is:

- A. Use of blood-thinning medications
- B. History of cancer
- C. Genetic predisposition
- D. History of being underweight as a child



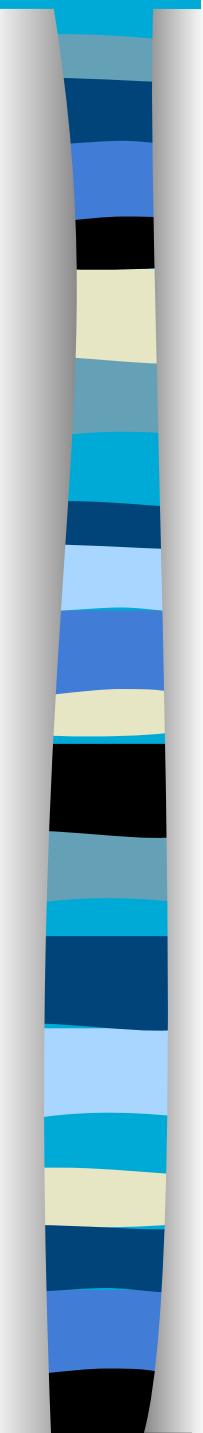


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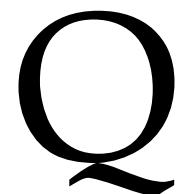
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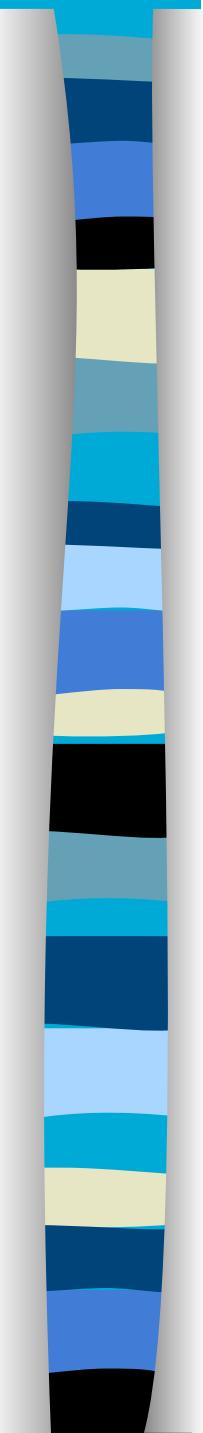


# Causes

According to research, a significant factor that contributes to obesity is:

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- B. A history of participation in higher education
- C. A history of cancer
- D. The level of access a person has to healthy food



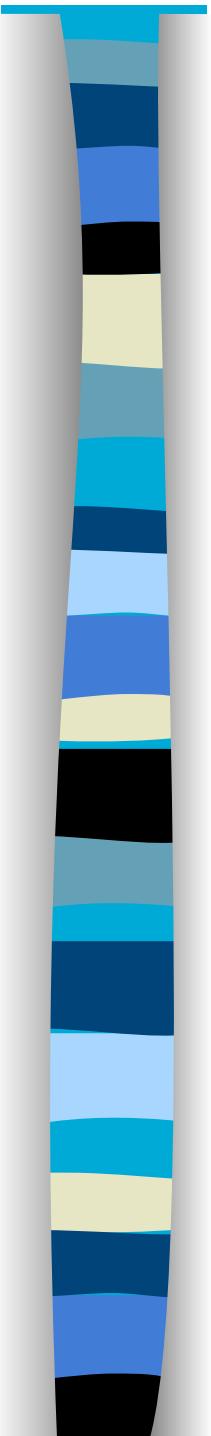


# Causes

According to research, a significant factor that contributes to obesity is:

- A. The use of blood-thinning medications
- B. A history of participation in higher education
- C. A history of cancer
- D. The level of access a person has to healthy food**

A



# Causes

**Obesity causes** A number of factors contribute to the occurrence of obesity including genetic predisposition, lifestyle choices, environmental factors such as access to safe places to walk or be active,

# Definition



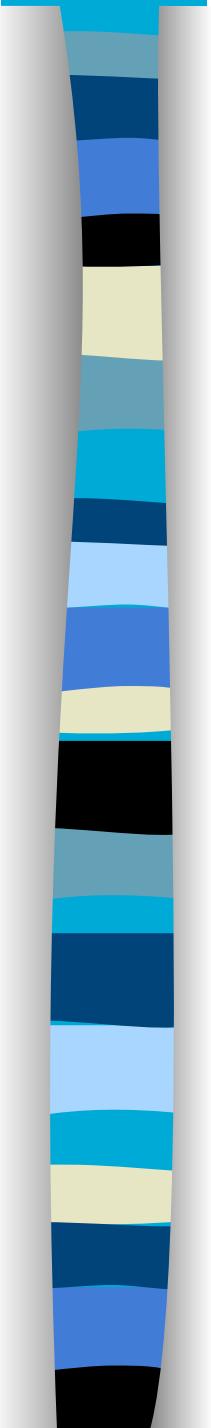




# ABMP Exam Coach

Special Populations:  
Clients who are Obese

Quality of Life

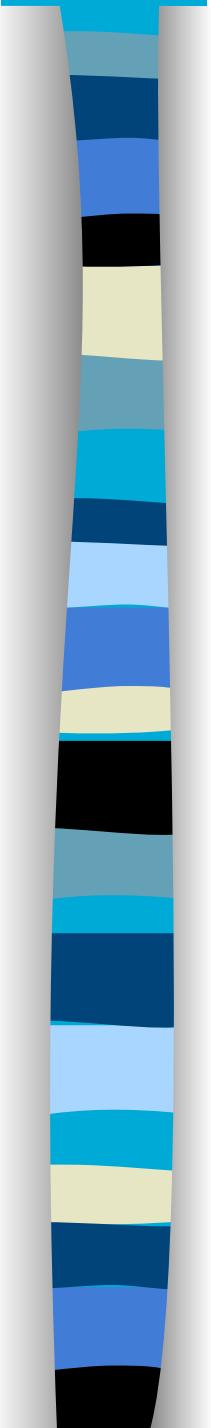


# Quality of Life

According to research, overweight and obese adults generally use CAM therapies (including massage):

- A. Significantly less than normal-weight adults
- B. Slightly more than normal-weight adults
- C. Significantly more than normal-weight adults
- D. About the same as normal-weight adults

Q

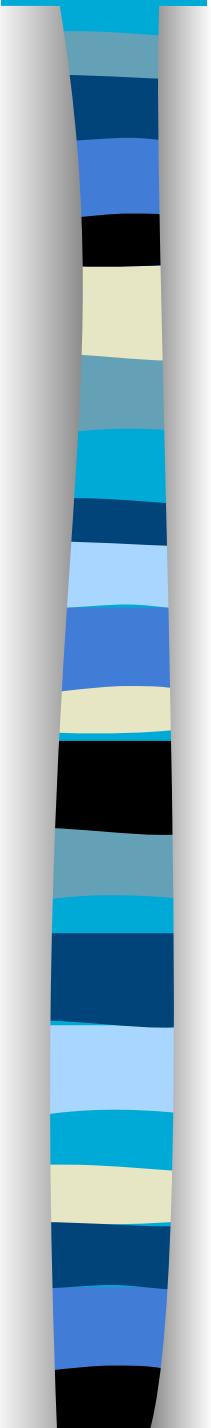


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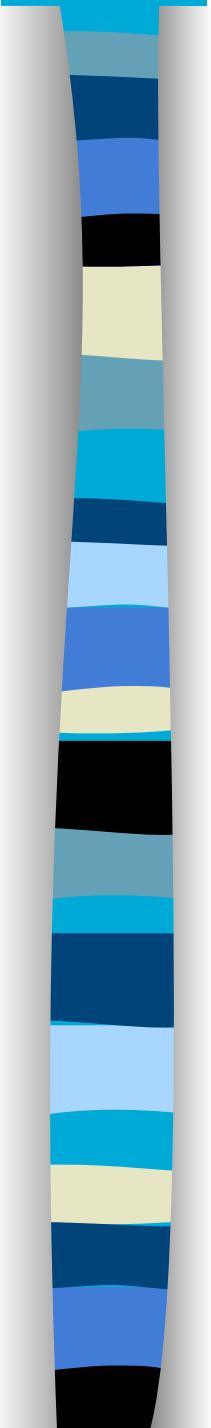


# Quality of Life

Obese clients often experience:

- A. Improved circulation due to the pressure of adipose tissue that supports venous return
- B. Less heart disease than normal-weight people
- C. Decreased circulation due to the pressure of adipose tissue on blood and lymph vessels
- D. Improved breathing due to the increased size of the chest cavity

Q

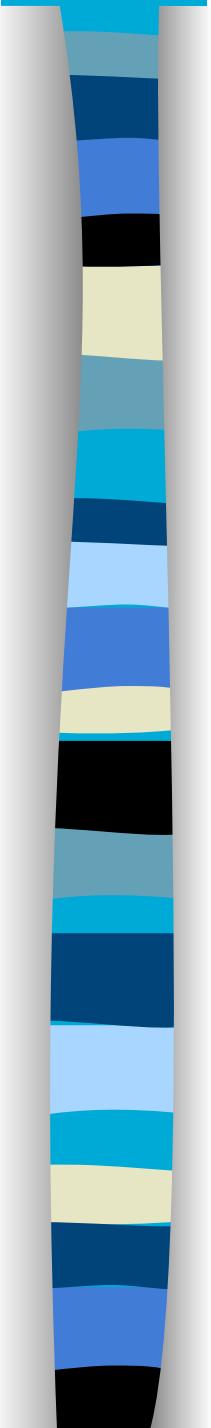


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- D. Improved breathing due to the increased size of the chest cavity

A



# Quality of Life

**Obesity impact on quality of life** Obesity impacts lifestyle and can lead to:

- Lowered self-esteem
- Depression
- Significantly diminished quality of life.

Overweight and obese adults generally use CAM therapies (including massage) less than normal-weight adults. This may be because they are reluctant to expose themselves and feel vulnerable to prejudice and criticism.

**CAM** Complementary and alternative medicine.

# Definition



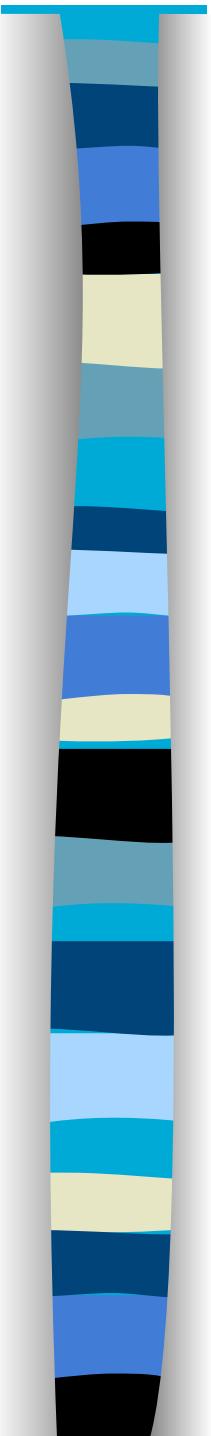




# ABMP Exam Coach

Special Populations:  
Clients who are Obese

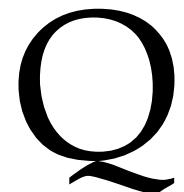
Benefits

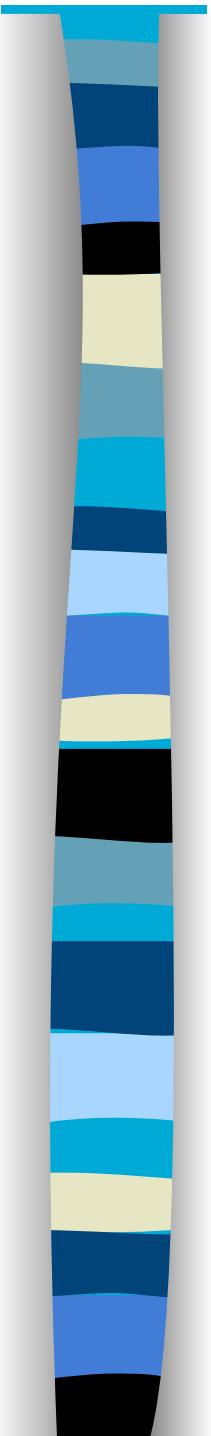


# Benefits

A client who is obese might seek out massage to address:

- A. High cholesterol
- B. Varicose veins
- C. Body mass index
- D. Low-back pain





# Benefits

A client who is obese might seek out massage to address:

**A. High cholesterol**

- High cholesterol is associated with a number of health conditions including coronary artery disease, heart attack, and stroke.

**B. Varicose veins**

- Massage does not change the prognosis of varicose veins, which get progressively worse. Non-massage intervention strategies may slow progression.

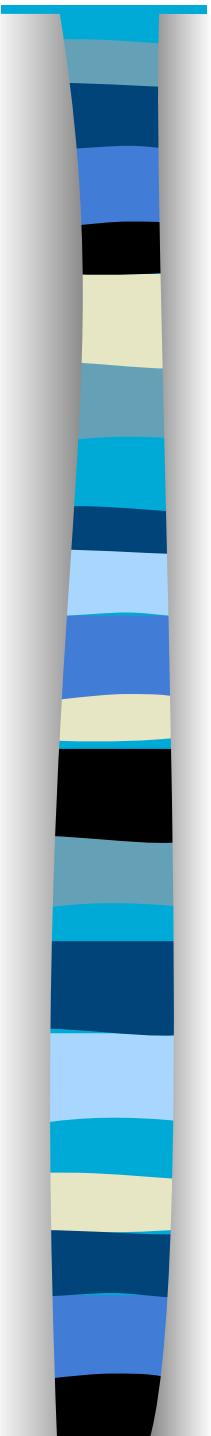
**C. Body mass index**

- Used to determine a person's healthy weight by relating weight to height.

**D. Low-back pain**

- **Low back pain is a condition that benefits from massage and is strongly associated with obesity.**

A

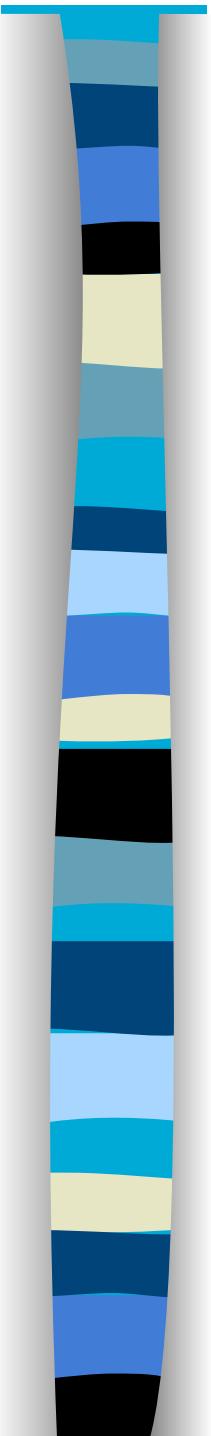


# Benefits

A client who is obese might seek out massage to address:

- A. Skin health related to acne or breakouts
- B. Diminished bone density due to the stress of excess weight on the skeletal system
- C. Foot conditions due to an inability to trim or file toenails
- D. Sore joints due to the stress of excess weight on the skeletal system

Q

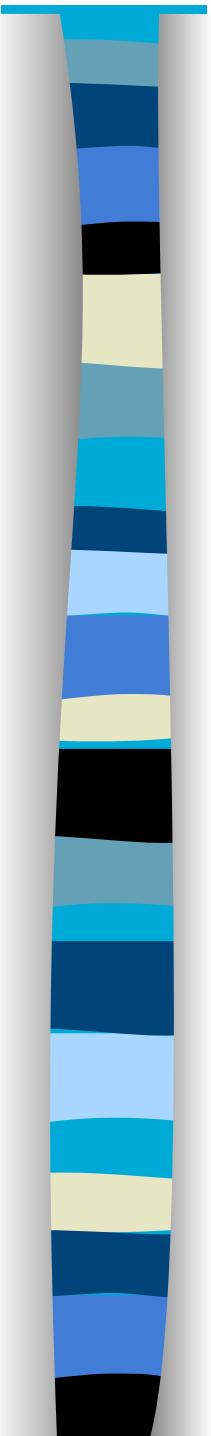


# Benefits

A client who is obese might seek out massage to address:

- A. Skin health related to acne or breakouts
  - These conditions are not specific to obesity.
- B. Diminished bone density due to the stress of excess weight on the skeletal system
  - These conditions are not specific to obesity.
- C. Foot conditions due to an inability to trim or file toenails
  - Out of scope of practice to work with toenails
- D. Sore joints due to the stress of excess weight on the skeletal system**

A

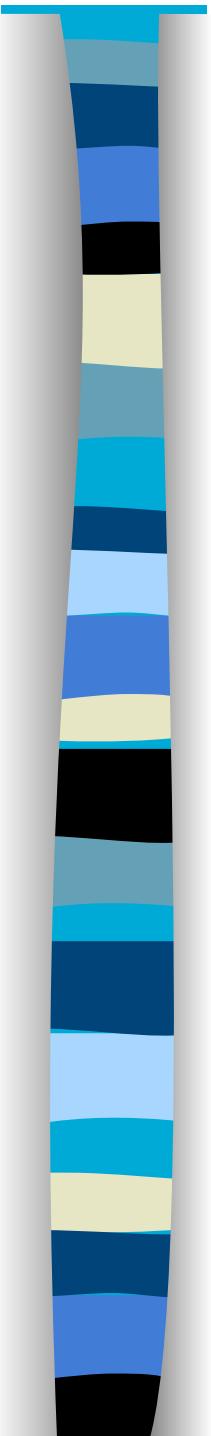


# Benefits

A client who is obese might seek out massage to address:

- A. Asthma and chronic breathing disorders
- B. Varicose veins and other circulation conditions
- C. Skin health related to bedsores
- D. Postural shifts from extra body mass that cause muscular imbalances

Q



# Benefits

A client who is obese might seek out massage to address:

- A. Asthma and chronic breathing disorders
  - These respiratory conditions are not associated with obesity
  - Massage does support improved breathing patterns, which may be affected by obesity.
- B. Varicose veins and other circulation conditions
  - Massage does not change the prognosis of varicose veins, which get progressively worse. Non-massage intervention strategies may slow progression.
- C. Skin health related to bedsores
- D. Postural shifts from extra body mass that cause muscular imbalances

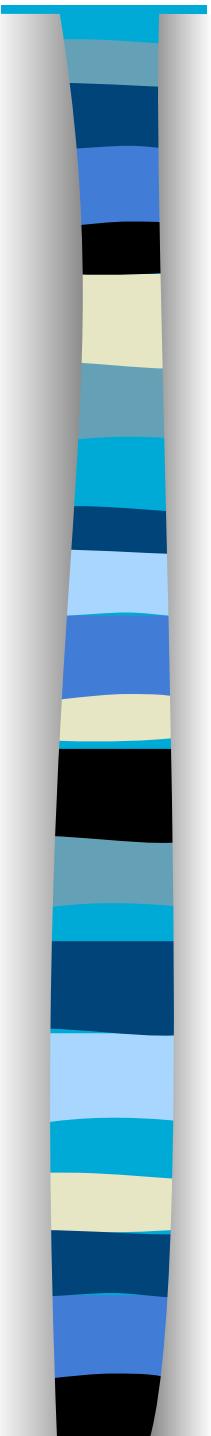
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# Benefits

The ethical massage of clients who are obese includes:

- A. Seeking to provide a meaningful massage experience that supports the client in achieving his/her goals
- B. Suggestions of supplements that support the client's nutritional needs
- C. A discussion of the dangers of being overweight and the impact of obesity on joints and muscles
- D. A referral to a nutritionist to help the client get back on track with weight loss

Q



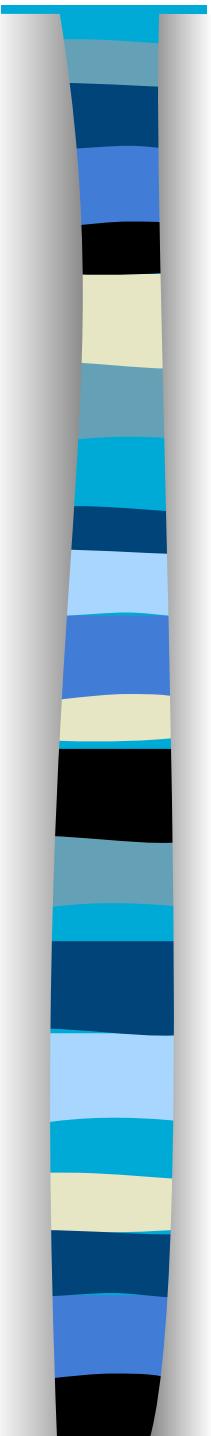
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NOTE: B and C are out of scope of practice. A is better than D.

A



# Benefits

**Benefits of massage for obesity** Massage benefits people who are obese by helping them overcome common challenges related to the physical and psychological stresses that accompany this condition by reducing:

- Muscle soreness
  - Joint pain
  - Fascial restrictions
  - Hypertonicities
  - Stress
- 
- Addressing postural shifts that occur with extra body mass.
  - Improving breathing and sleep patterns
  - Psychological benefit from the social contact provided by massage.

# Definition



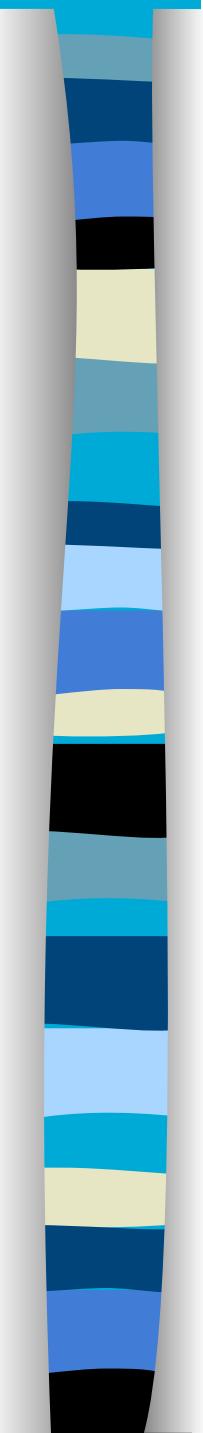




# ABMP Exam Coach

Special Populations:  
Clients who are Obese

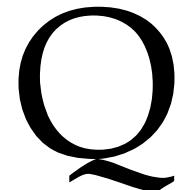
Cautions

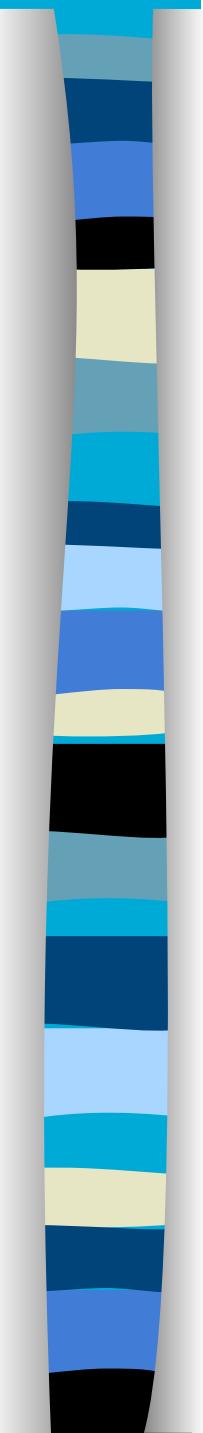


# Cautions

When providing massage to clients who are obese:

- A. Avoid pushing through adipose tissue to access muscle
- B. Push through adipose tissue to access muscle
- C. Use a predominance of tapotement strokes to better access muscle
- D. Pull adipose tissue away to one side to access muscle



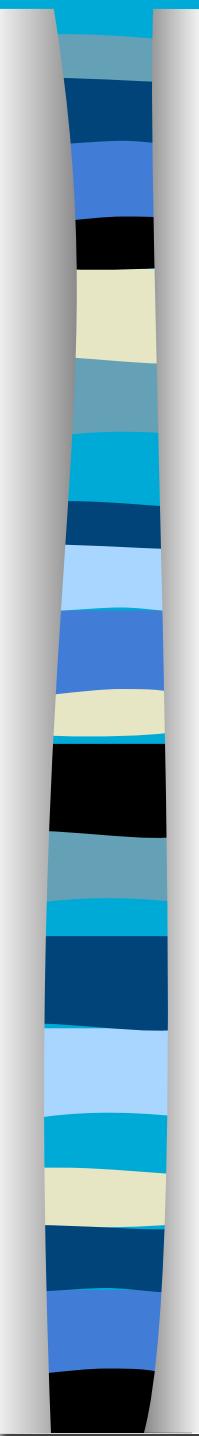


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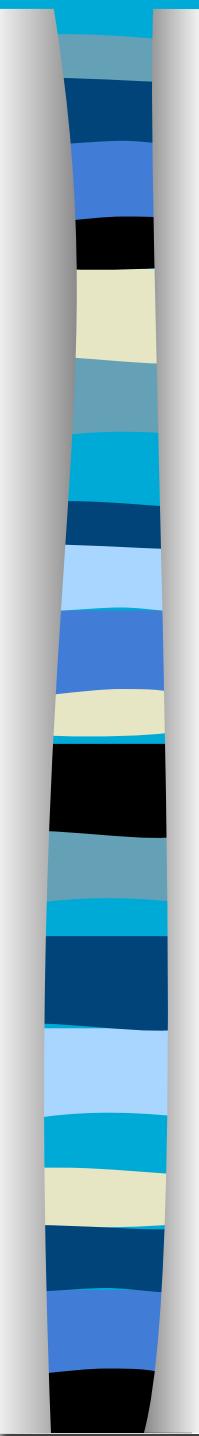


# Cautions

If a client has a history of significant weight loss, and skin folds that hang loosely are present, the practitioner should:

- A. Use deep work, including petrissage, directly on the folds to stimulate skin tightening
- B. Use skin-rolling techniques across the folds to support local circulation
- C. Avoid gentle strokes that do not stimulate the folds, as they may feel irritating to clients
- D. Avoid deep pressure or techniques that might "pinch" the folds



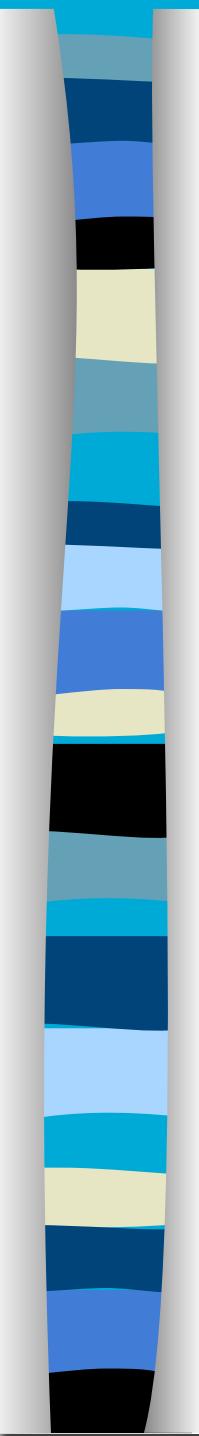


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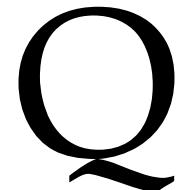


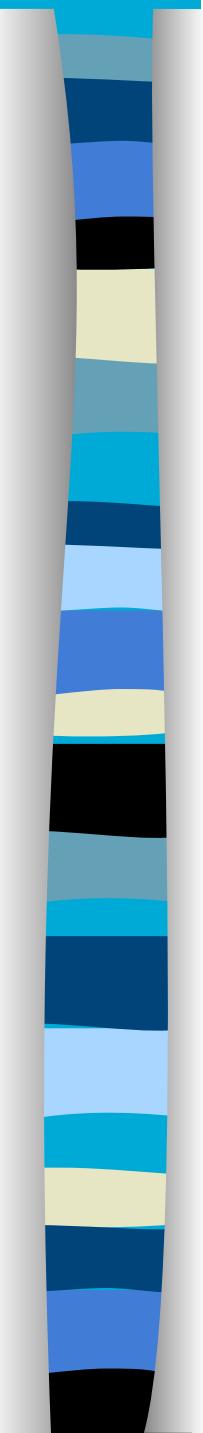


# Cautions

Practitioners must be cautious when working with areas where adipose deposits are particularly excessive because:

- A. This tissue tends to be highly vascular and may be prone to bruising
- B. This tissue tends to be highly vascular and may be prone to tissue tearing
- C. This tissue tends to lack circulation and can be easily overstimulated
- D. This tissue tends to lack circulation and so fluids may pool in the tissue



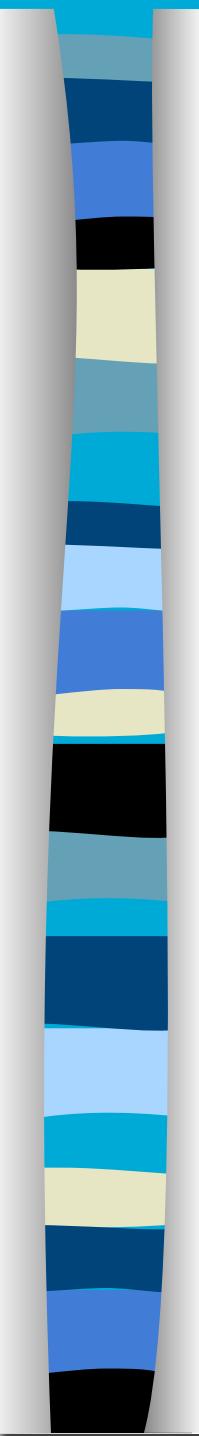


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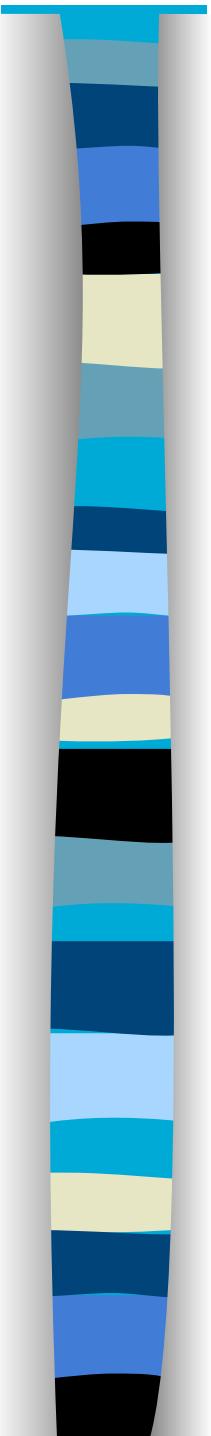


# Cautions

A thorough health history and client interview process is especially necessary when working with a client who is obese because:

- A. Obese clients tend to be older adults who suffer from age-related conditions
- B. Obese clients almost always have diabetes in addition to being overweight
- C. Obese clients almost always have diminished bone density, which makes them susceptible to bone breaks during massage
- D. Obesity is often a contributing factor to many other health conditions that require massage adaptations



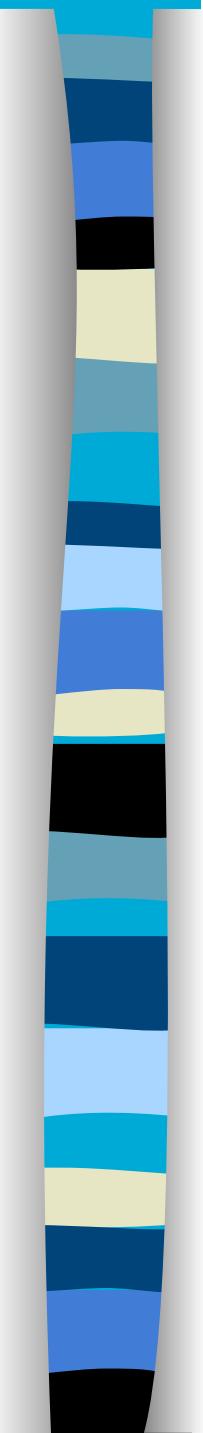


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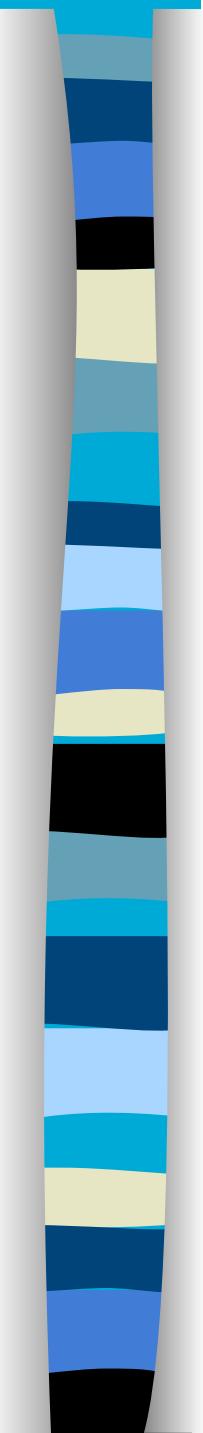


# Cautions

When working with clients who are obese, it can be difficult to:

- A. Access adipose tissue under muscle tissue
- B. Provide nurturing touch that supports feelings of respect and connection
- C. Provide relaxation strokes that decrease stress
- D. Access muscle tissue under adipose tissue

Q

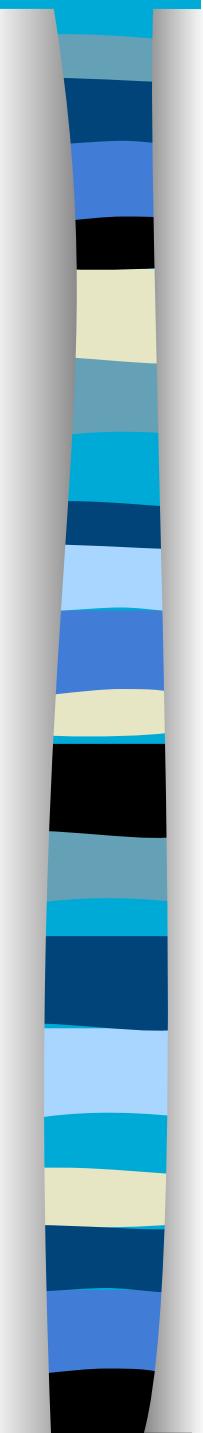


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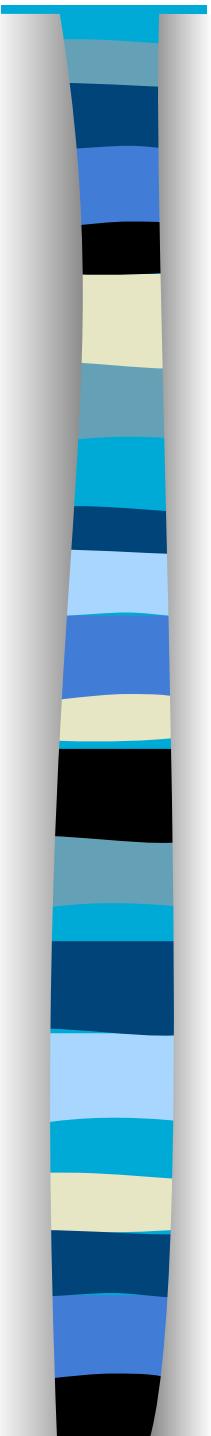


# Cautions

If a client has a history of weight loss surgery involving the digestive system:

- A. Lower-back massage is contraindicated
- B. Abdominal massage is indicated
- C. Abdominal massage is contraindicated
- D. Lower-back massage is indicated

Q

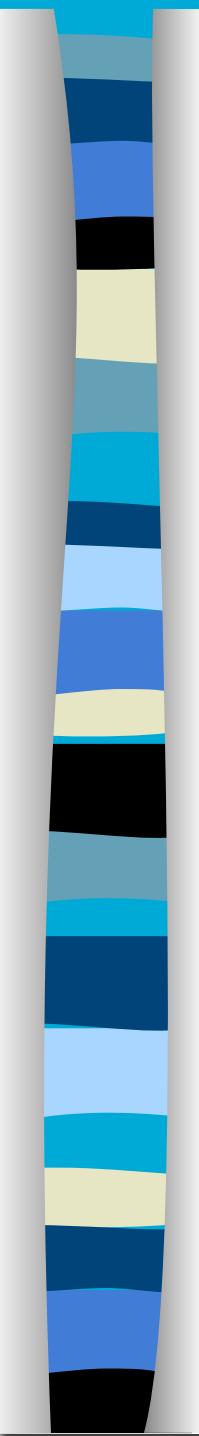


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# Cautions

## **Massage cautions for clients who are obese**

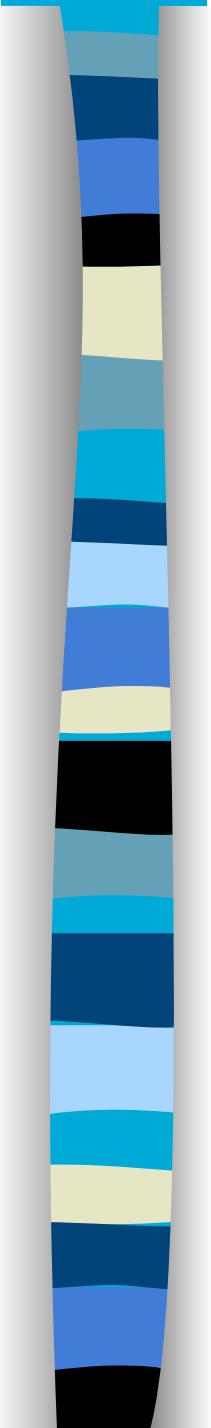
- Conduct a thorough health history intake, as obesity is often a contributing factor to many other health conditions that may make massage adaptations necessary, or may completely contraindicate massage.
- Obtain a physician's release in the event of recent weight loss surgery.
- Practitioners must be cautious when working with areas where adipose deposits are particularly excessive because this tissue tends to be highly vascular and may be prone to bruising.
- For this reason, when providing massage to clients who are obese, avoid pushing through adipose tissue to access muscle.
- Also, avoid deep work over any folds of excess skin that may occur if a client has lost a significant amount of weight.

# Definition





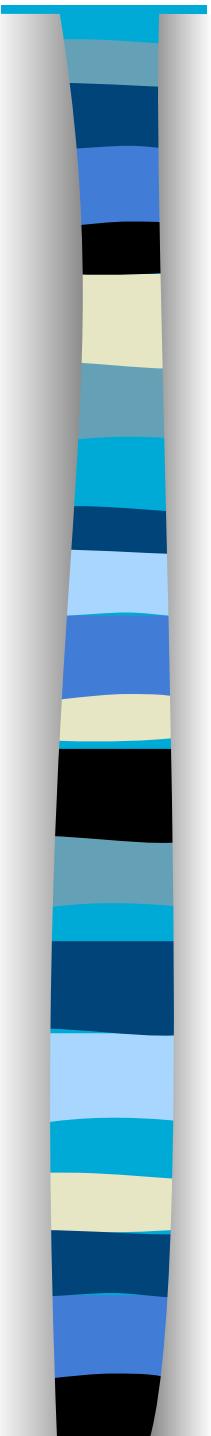




# ABMP Exam Coach

Special Populations:  
Clients who are Obese

Considerations

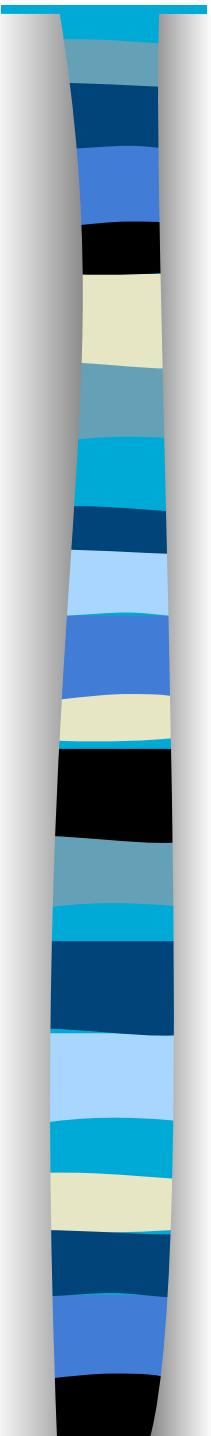


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If a client has a history of weight loss surgery involving the digestive system:

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# Considerations

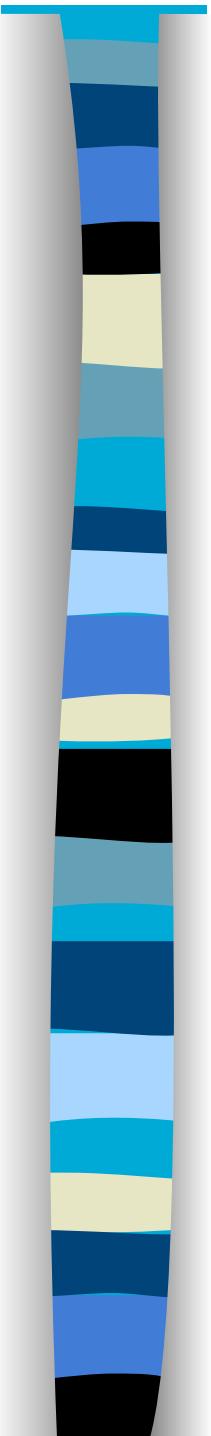
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- C. Abdominal massage is contraindicated**
- D. Lower-back massage is indicated

NOTE: Weight loss surgery is also called bariatric surgery.

- Baros = weight, burden, heavy
- -iatric = healing or treatment

A

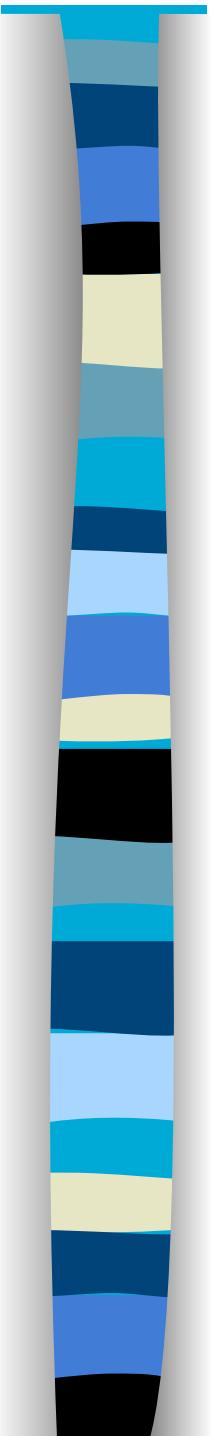


# Considerations

If the size of the client poses positioning challenges on a massage table (e.g., the table is too narrow, etc.), practitioners often:

- A. Determine that the client is contraindicated for massage
- B. Position the client on a mat situated on the floor
- C. Position the client on a massage table in the supine position, but not ask the client to turn over during the session
- D. Position the client on a massage table in the prone position, but not ask the client to turn over during the session

Q

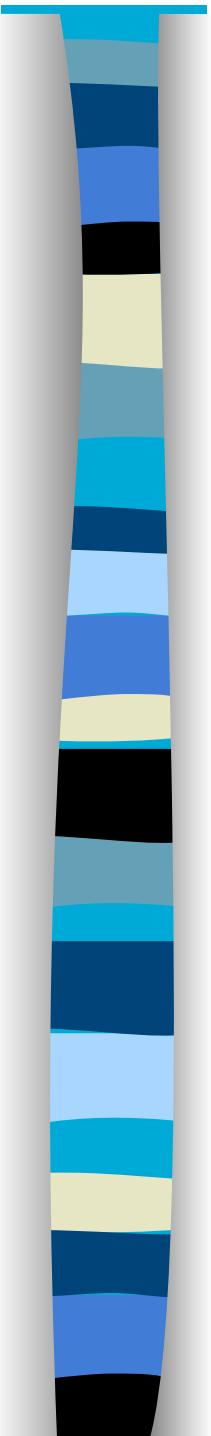


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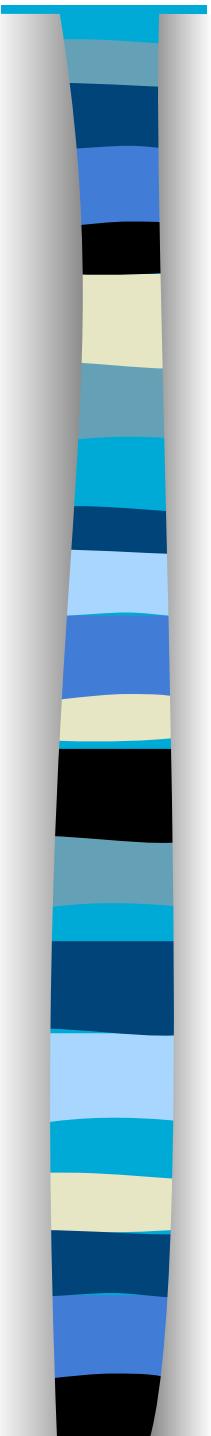


# Considerations

Clients who are obese should:

- A. Be encouraged to undress to their level of comfort as massage can always be applied over clothing
- B. Be encouraged to take off all of their clothing but then draped with additional blankets for boundary protection
- C. Be encouraged to take off all of their clothing in order to confront their body issues
- D. Be encouraged to remain clothed while receiving massage until they lose weight and feel comfortable

Q

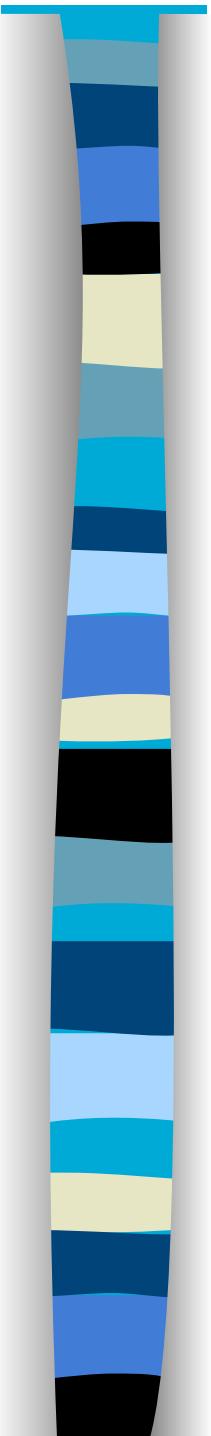


# Considerations

Clients who are obese should:

- A. Be encouraged to undress to their level of comfort as massage can always be applied over clothing
- B. Be encouraged to take off all of their clothing but then draped with additional blankets for boundary protection
- C. Be encouraged to take off all of their clothing in order to confront their body issues
- D. Be encouraged to remain clothed while receiving massage until they lose weight and feel comfortable

A

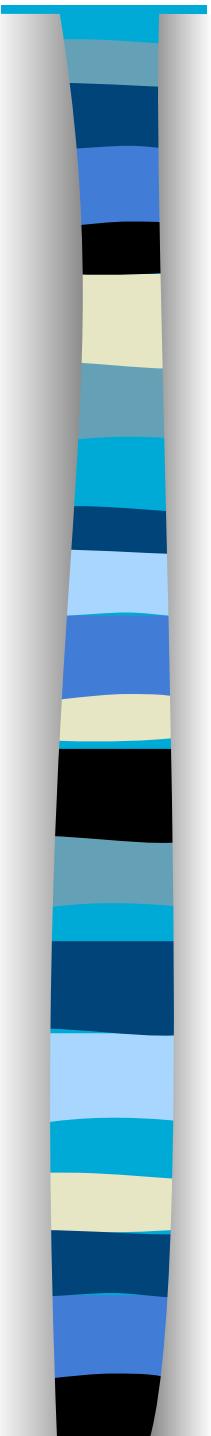


# Considerations

Overweight or obese clients may experience:

- A. Difficulty breathing in the semireclined position
- B. Difficulty with circulation in the supine and prone position
- C. Difficulty with circulation in the semireclined position
- D. Difficulty breathing in the supine and prone position

Q

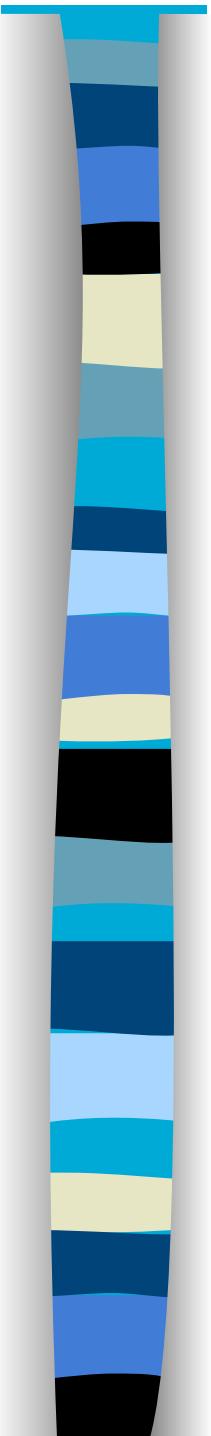


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- B. Difficulty with circulation in the supine and prone position
- C. Difficulty with circulation in the semireclined position
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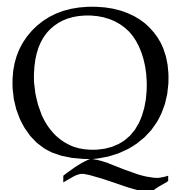
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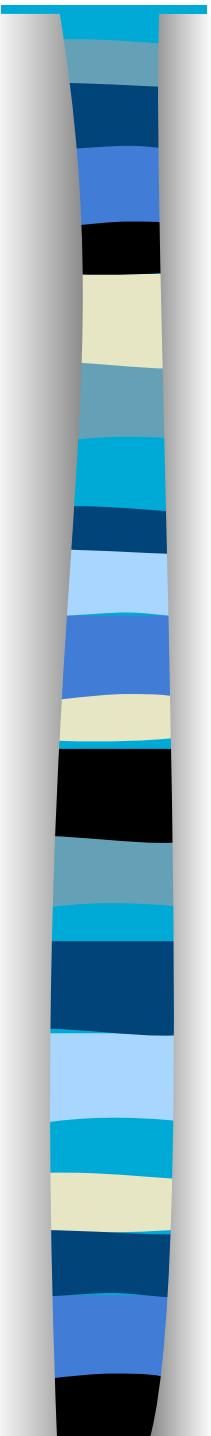


# Considerations

To maintain good body mechanics when working on clients who are obese, the practitioner should:

- A. Lower the table height to gain additional height leverage
- B. Raise the table height to gain additional height leverage
- C. Maintain the same table height, but watch for the tendency to side-flex the neck while working
- D. Maintain the same table height, but watch for the tendency to bend at the waist while working



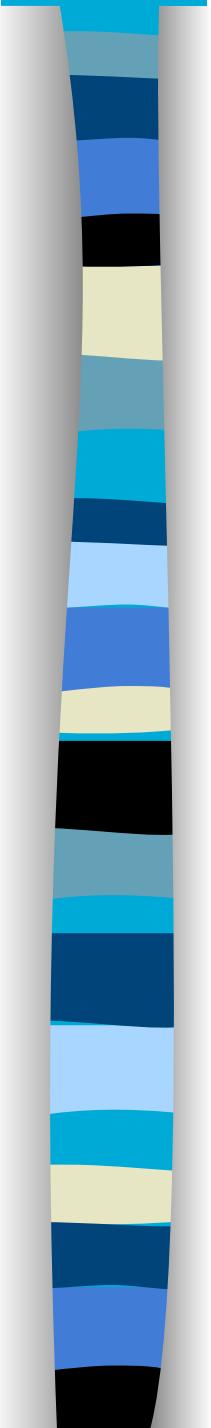


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- D. Maintain the same table height, but watch for the tendency to bend at the waist while working

A



# Considerations

## **Massage considerations for clients who are obese**

- Clients may prefer to leave on some or all of their clothing during sessions.
- They may experience difficulty breathing when positioned supine or prone for long periods of time.
- Side-lying and the semi-reclined position may be the best positioning options.
- Side pieces for the massage table may be needed to increase the width of the table and a step stool is helpful for getting clients on and off the table.
- A large sheet (queen size as opposed to the twin size most often used on massage tables) may be needed to provide adequate draping.

# Definition



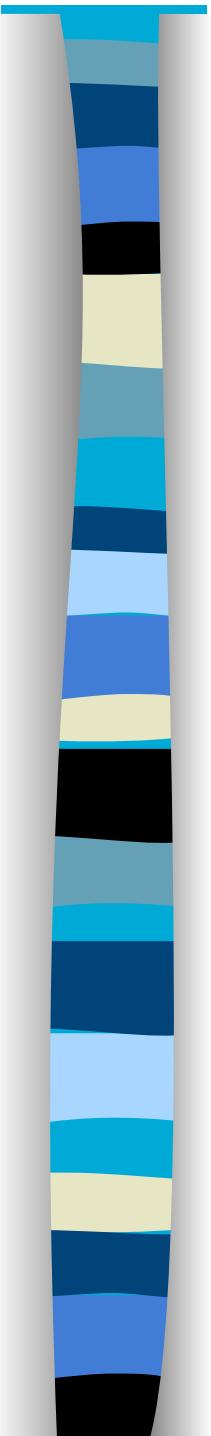




# ABMP Exam Coach

Special Populations:  
Clients who are Obese

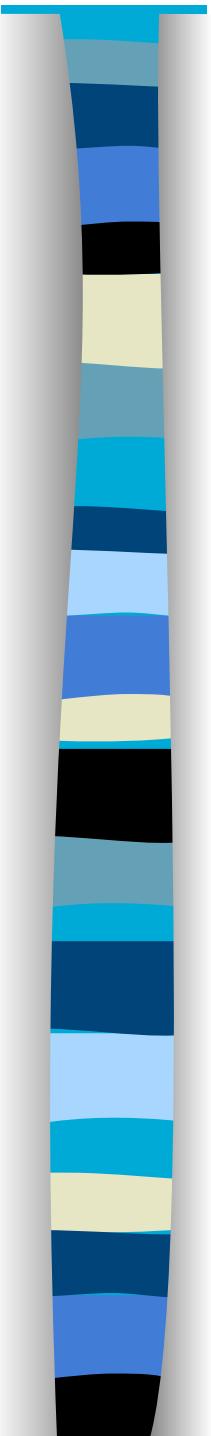
Obesity-Associated Pathologies



# Obesity-Associated Pathologies

## THE TOP 10 PATHOLOGIES ASSOCIATED WITH OBESITY

- Hypertension
- Skin conditions
- Back pain
- Cancer
- Coronary artery disease
- Diabetes mellitus
- Gallstones
- High Cholesterol
- Infertility
- Leg conditions

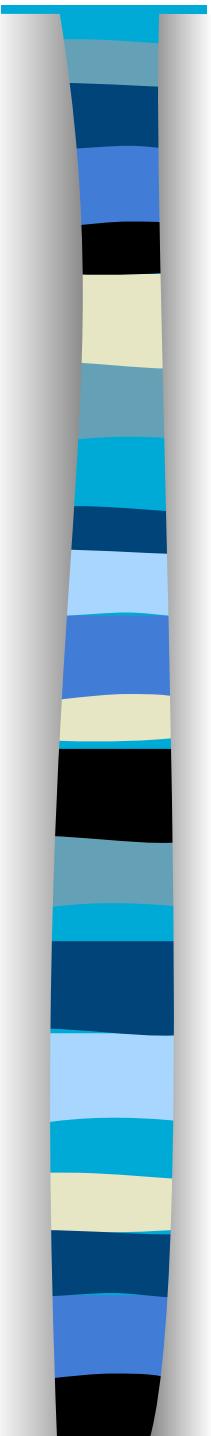


# Obesity-Associated Pathologies

**Hypertension** A technical term for high blood pressure.

- Normal blood pressure: below 120 systolic and below 80 diastolic
- High normal (pre-hypertension): 120–139 systolic and 80–89 diastolic
- Hypertension stage 1: 140–159 systolic and 90–99 diastolic
- Hypertension stage 2: 160 or higher systolic and 100 or higher diastolic
  
- High blood pressure is a factor in the development of many different diseases and conditions including:
  - Damage to arteries
  - Aneurysm
  - Coronary artery disease
  - Heart failure
  - Transient ischemic attack
  - Stroke
  - Dementia
  - Kidney failure

## Definition

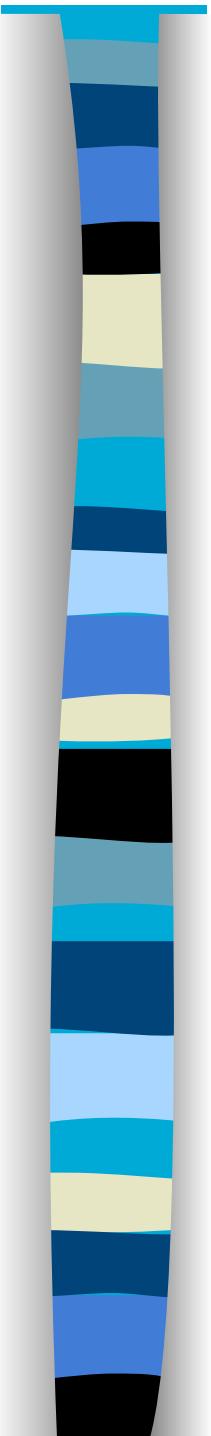


# Obesity-Associated Pathologies

## Skin conditions

- Stretching of the skin may result in stretch marks (striae)
- Retained moisture in body folds encourages the growth of bacteria and fungi, leading to skin rashes and potential breakdown of the tissue.
- Decubitus ulcers, commonly called bedsores, occur due to impaired circulation.
- Hormonal changes cause acanthosis nigricans, which are darkened areas of the neck and body folds.

# Definition



# Obesity-Associated Pathologies

## Back pain

- The experience of pain in the low-back region is related to many conditions including pathologies of:
- The bony spine
- Discs between the vertebrae
- Ligaments around the spine and discs
- Regional inflammation
- Spinal cord and nerve conditions
- Muscular conditions
- Conditions of the pelvis or abdominal area
  
- Back pain is one of the top 10 conditions associated with obesity.

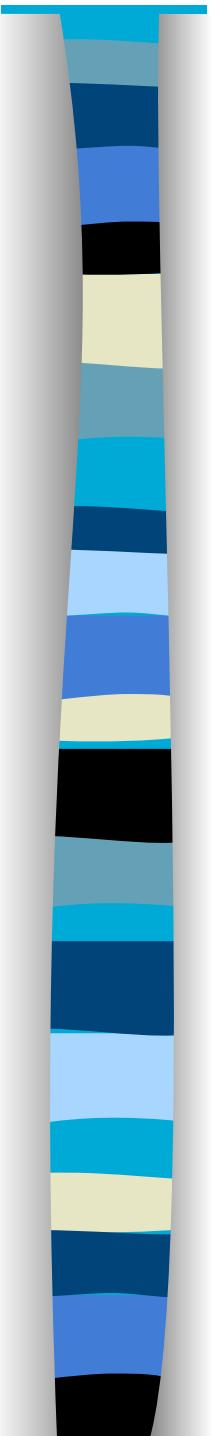
## Definition

# Obesity-Associated Pathologies

## Cancerous disease

- A group of diseases (e.g., skin cancer, liver cancer, etc.) caused by normal cells mutating and replicating uncontrollably.

# Definition

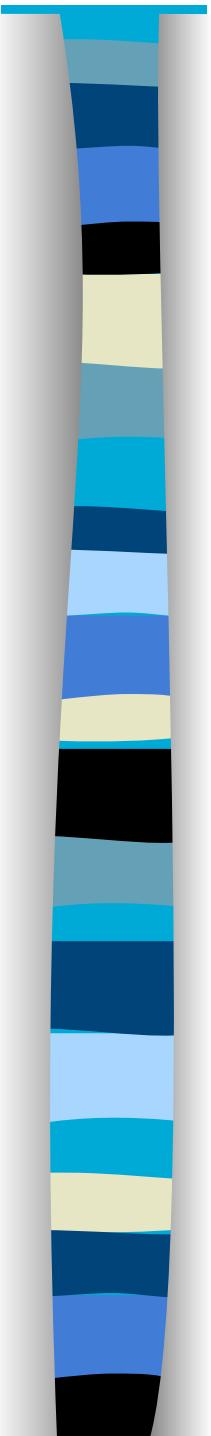


# Obesity-Associated Pathologies

## Coronary artery disease

- A condition where one or more arteries that supply blood to the heart are impeded or blocked.
- The primary cause is atherosclerosis.
  - **Atherosclerosis** (a disease of the arteries characterized by the deposition of plaques of fatty material on their inner walls)
- Symptoms include:
  - **Angina pectoris** A condition marked by severe pain in the chest, often also spreading to the shoulders, arms, and neck, caused by an inadequate blood supply to the heart.
  - **Heart attack** A sudden and sometimes fatal occurrence of coronary thrombosis, typically resulting in the death of part of a heart muscle.

# Definition

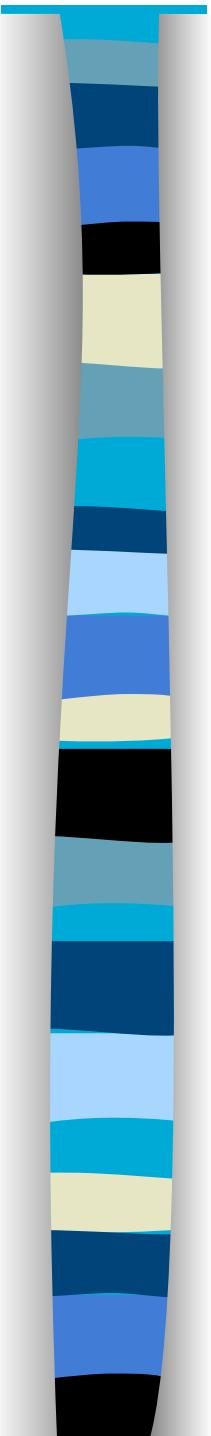


# Obesity-Associated Pathologies

## **Diabetes mellitus type 2**

- This condition develops when the pancreas no longer produces enough insulin, or cells stop responding to the insulin that is produced.
- Glucose in the blood can't be absorbed into the cells of the body, eventually causing serious health complications if not treated and managed.

# Definition

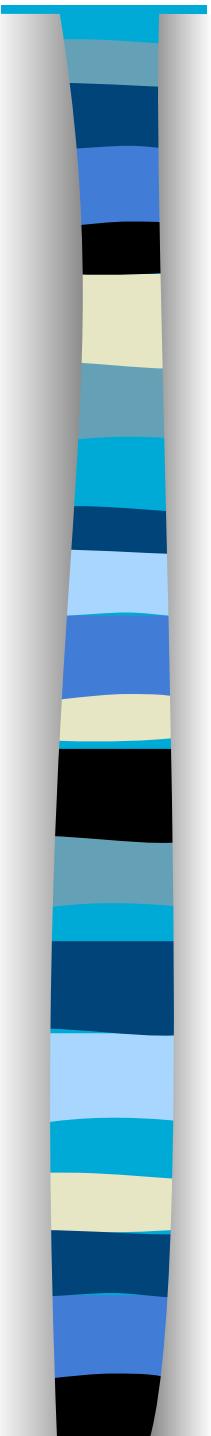


# Obesity-Associated Pathologies

## Gallstones

- A solid, crystal deposit that forms in the gallbladder.
- It can migrate to other parts of the digestive tract and cause severe pain with life-threatening complications.

## Definition

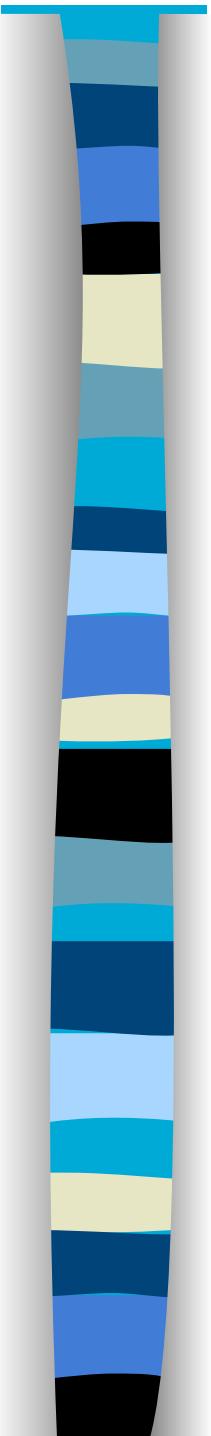


# Obesity-Associated Pathologies

## High cholesterol

- When the combination of low-density lipoprotein (LDL) "bad" cholesterol and high-density lipoprotein (HDL) "good" cholesterol exceeds 200 mg/dl.
- High cholesterol is associated with a number of health conditions including coronary artery disease, heart attack, and stroke.
- Risk factors include:
  - Lack of regular exercise
  - The intake of high-cholesterol foods
  - High-fat, high-calorie diet
  - Family history
  - Obesity
  - Alcoholism

## Definition

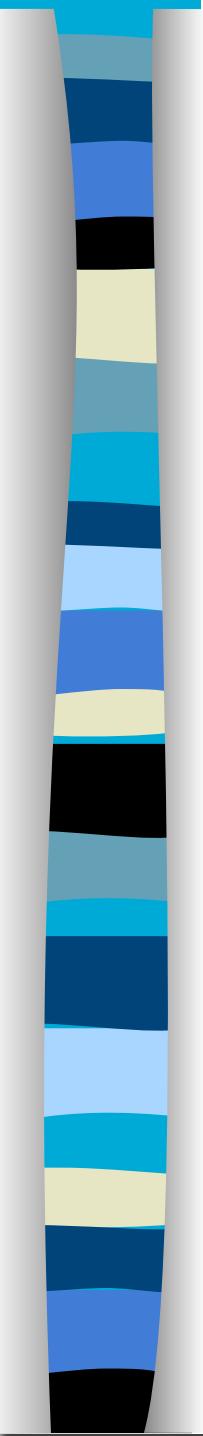


# Obesity-Associated Pathologies

## Infertility

- Diminished or absent ability to conceive and bear offspring.
- A couple is considered to be experiencing infertility if conception has not occurred after 12 months of sexual activity without the use of contraception.
- It has many causes and may be related to factors in the male, female, or both.

## Definition



# Obesity-Associated Pathologies

## Leg conditions

- Increased strain on the leg veins related to obesity may cause:
  - Fluid retention
  - Swelling of the ankles and feet
  - The rupture of superficial capillaries (capillaritis)
  - Varicose veins.

# Definition



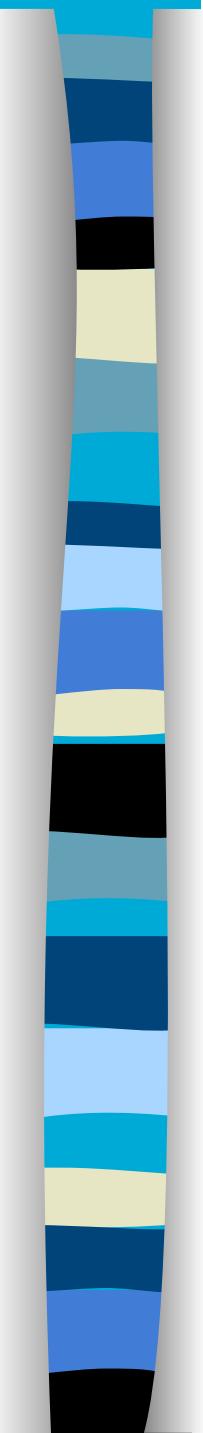




# ABMP Exam Coach

Special Populations:  
Clients who are Children

Age Groups

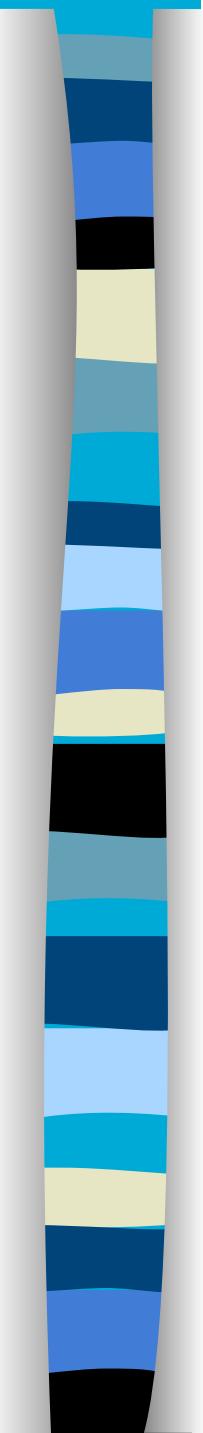


# Age Groups

Children and adolescents are defined as:

- A. Young people between the ages of 3–16 years
- B. Young people between the ages of 3–18 years
- C. Young people between the ages of 3–15 years
- D. Young people between the ages of 3–17 years

Q

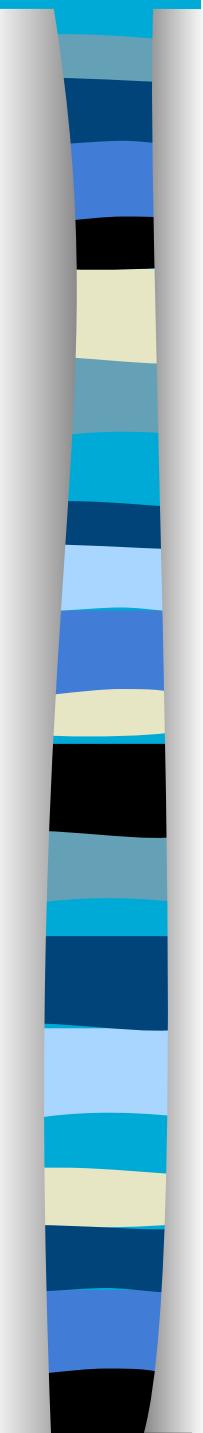


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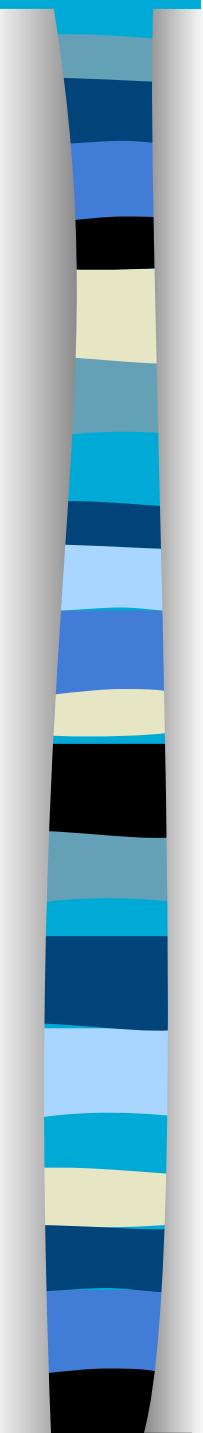


# Age Groups

For massage sessions with babies and young children:

- A. Obtain a health history at the first visit but no other chart notes are necessary
- B. Obtain a physician's release, even if the infant is in perfect health
- C. Make a line item in your sales book but no other records are necessary
- D. Keep chart notes as you would for any other massage

Q

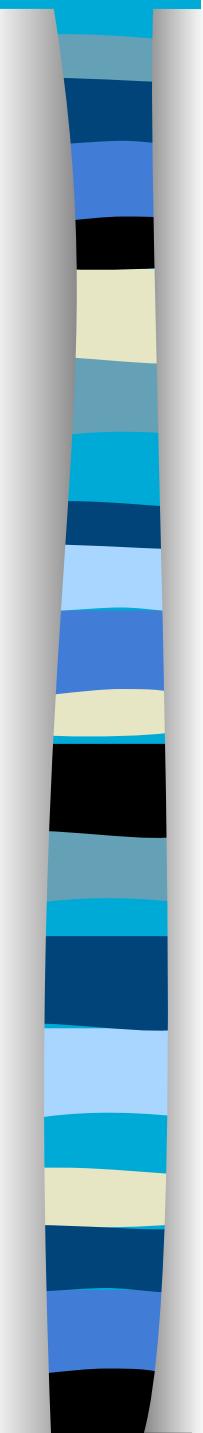


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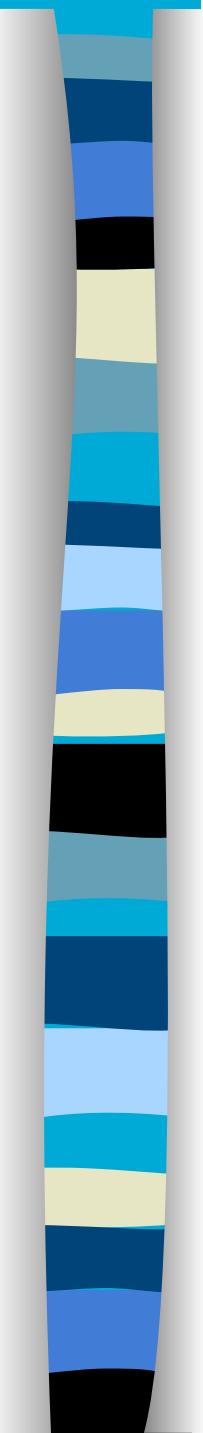


# Age Groups

Because children are not of legal age:

- A. They must have a parent or legal guardian present during the entire session
- B. They must have a parent or legal guardian sign a release before the parent/guardian leaves the child
- C. The parent or legal guardian must remain for the first 5 minutes of the session and return 5 minutes before the end of the session
- D. The parent or legal guardian must walk the child into the building and out of the building to prevent liability concerns of kidnapping



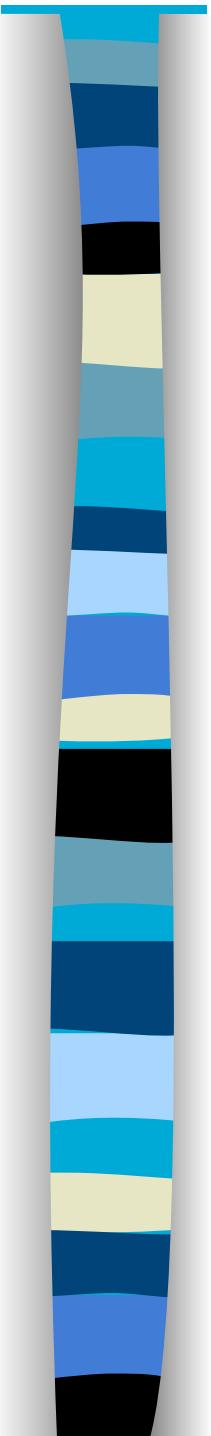


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A



# Age Groups

**Infant** A human from the time of birth up to one year of age.

**Toddler** A human between the ages of 1 year and 3 years of age.

**Child (biological)** A human between the stages of birth and puberty.

**Child (legal)** A minor; a person younger than the age of majority (under 18 years of age).

**Adolescence** A transitional stage of physical and psychological human development that generally occurs during the period from puberty to legal adulthood.

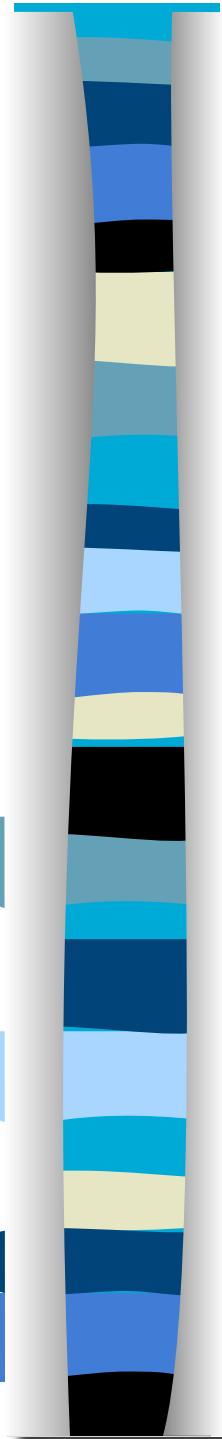
# Definition

# Age Groups

**Legal guardian (AKA: ward)** A person who has the legal authority (and the corresponding duty) to care for the personal and property interests of another person.

- Guardians are usually used in three situations:
  - Minors
  - Incapacitated adults or elderly persons
  - Developmentally disabled adults

# Definition



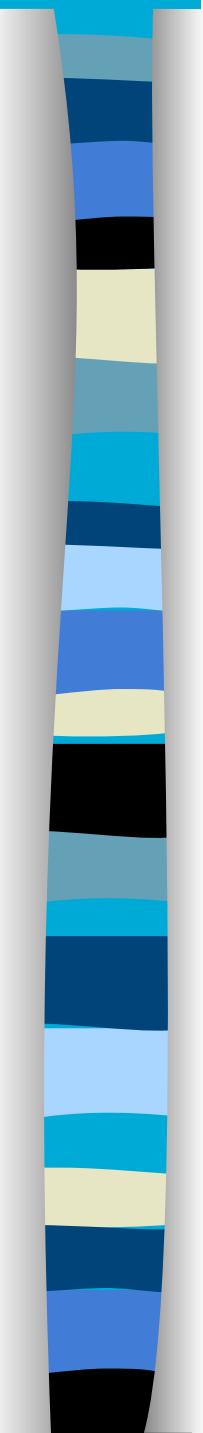




# ABMP Exam Coach

Special Populations:  
Clients who are Children

Infant Behavioral Cues

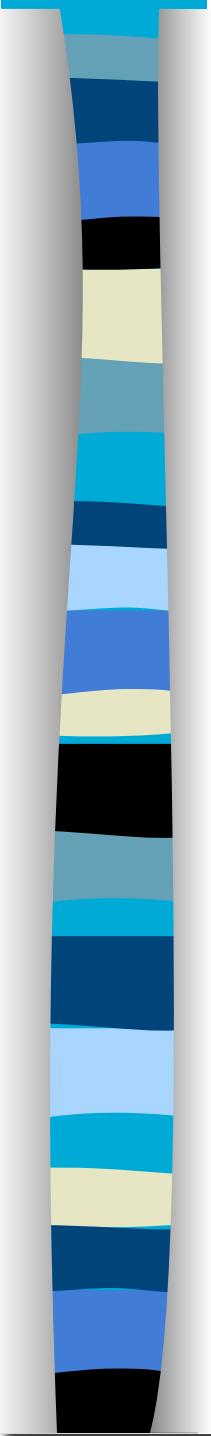


# Infant Behavioral Cues

Infants signal they are receptive to massage by:

- A. Arching the back
- B. Crying and making eye contact
- C. Flaring the fingers and toes
- D. Vocalizations and reaching toward the parent

Q

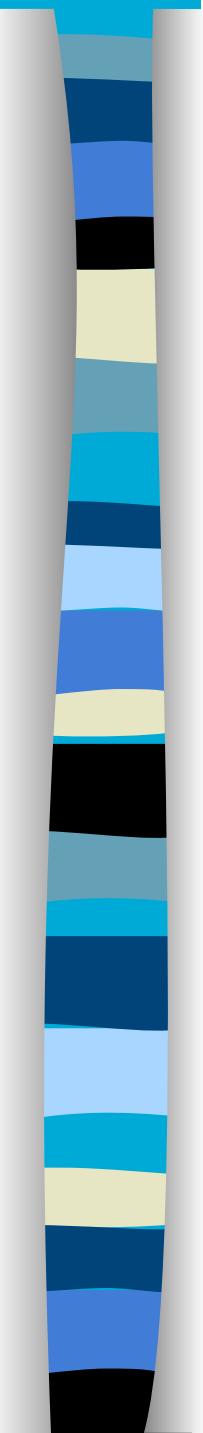


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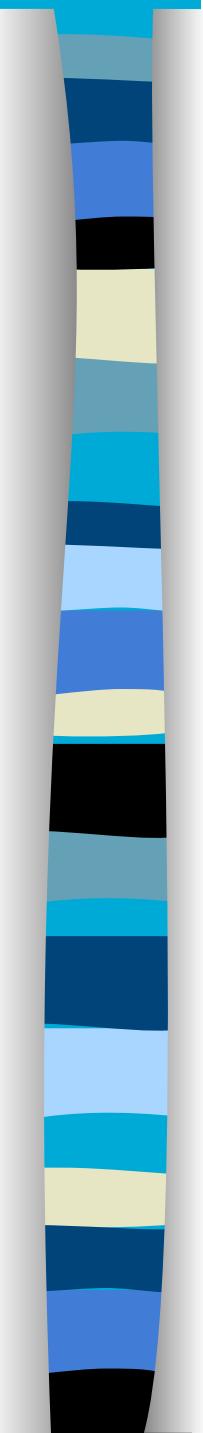


# Infant Behavioral Cues

Infants signal they are receptive to massage by:

- A. Breaking eye contact
- B. Smiling and making eye contact
- C. Kicking and jerking the arms and legs
- D. Arching the back

Q

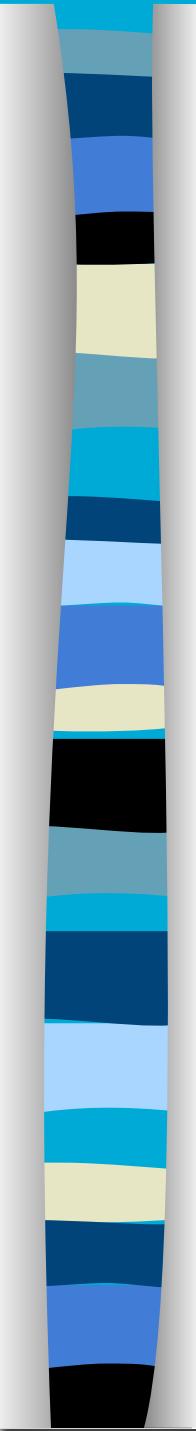


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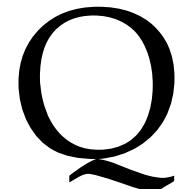
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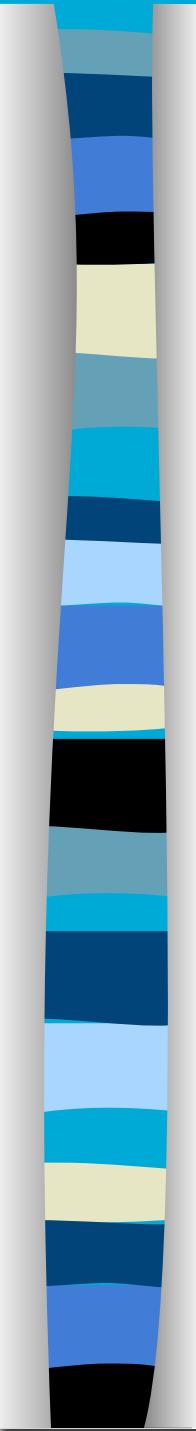


# Infant Behavioral Cues

A practitioner's role during an infant massage session is to:

- A. Provide work that will not overstimulate the infant and keep him/her awake
- B. Educate parents about behavioral cues that indicate the child is receptive to massage
- C. Provide work that correctly addresses infant muscular tension
- D. Provide the parents an opportunity to run errands while keeping the child safely engaged for an hour



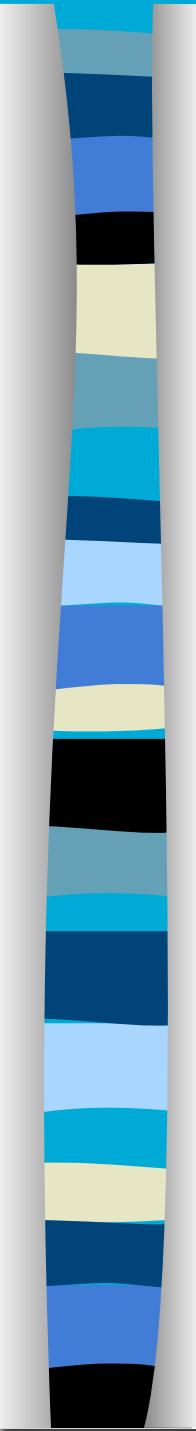


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A



# Infant Behavioral Cues

**Behavioral cues (infants)** The behaviors that tell a parent or practitioner what a baby needs.

- Cues that indicate a baby is **content** and interested in interaction include normal skin color, arms and legs that are flexed or tucked, hand touching the face, hand to the mouth or in the mouth, sucking, eye contact, smiling, and regular breathing rate.
- Cues that indicate a baby is **stressed** or getting too much stimulation include hiccupping, yawning, sneezing, frowning, looking away, squirming, frantic or disorganized activity, arms and legs pushing away, arms and legs limp and floppy, and skin color changes.

## Definition



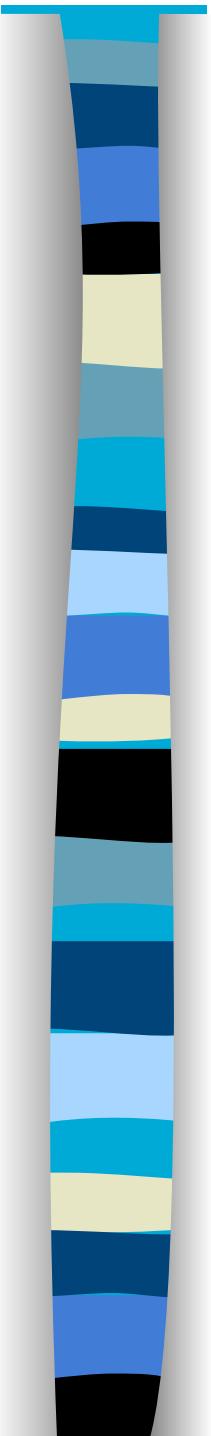




# ABMP Exam Coach

Special Populations:  
Clients who are Children

Benefits of Massage for Infants

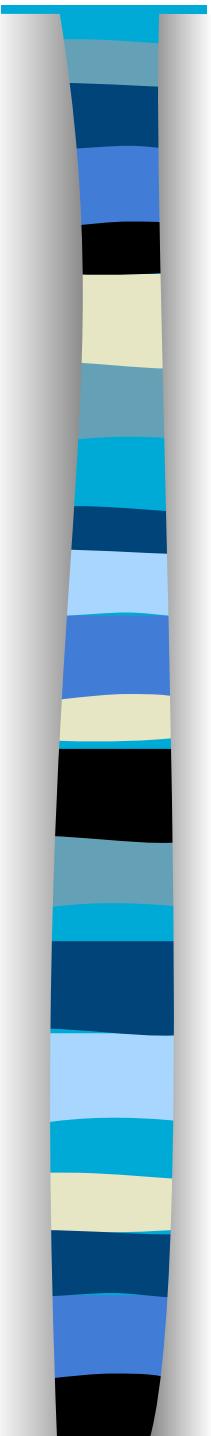


# Benefits of Massage for Infants

Infants who receive massage:

- A. Experience improved sleep quality
- B. Receive the tactile stimulation they need for bone health
- C. Experience better flexibility throughout life
- D. Experience better posture throughout life

Q

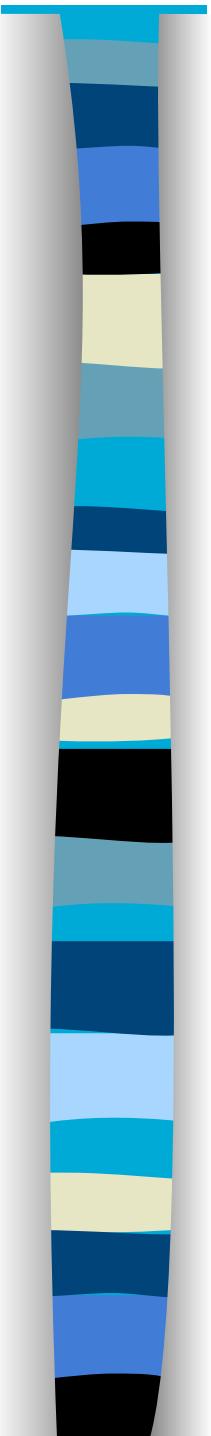


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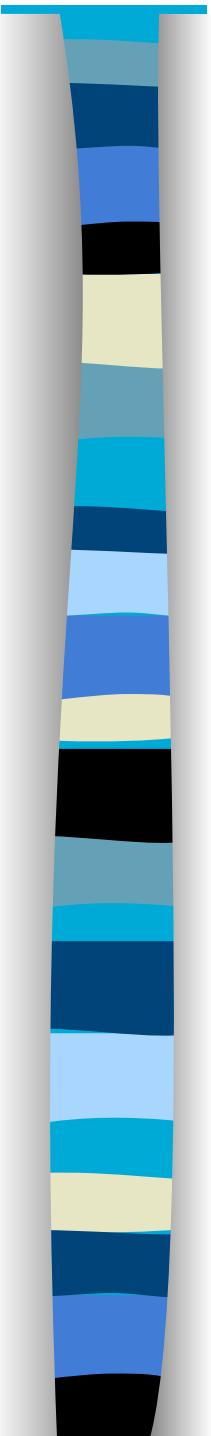


# Benefits of Massage for Infants

One benefit of infant massage is:

- A. Playful, positive interaction between practitioner and parents
- B. Playful, positive interactions between child and parents
- C. Reduced adhesions in muscle tissue
- D. Enhanced brain size

Q

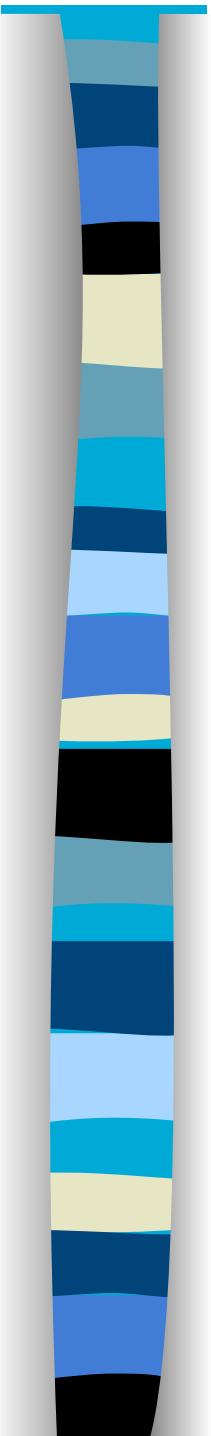


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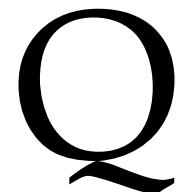
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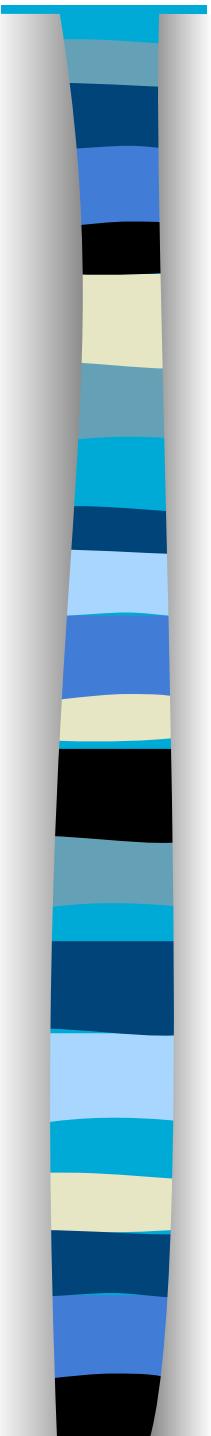


# Benefits of Massage for Infants

Parents or a practitioner can provide massage to infants:

- A. Every other week to prevent overstimulation
- B. No more than one time per week
- C. Daily, so long as the baby demonstrates receptivity to massage
- D. No more than one time per month



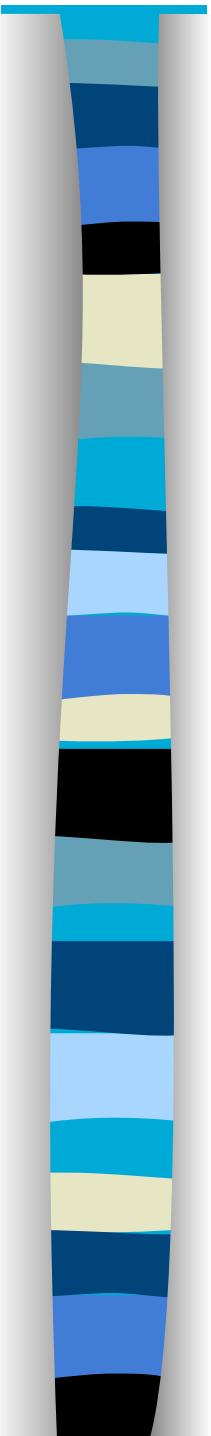


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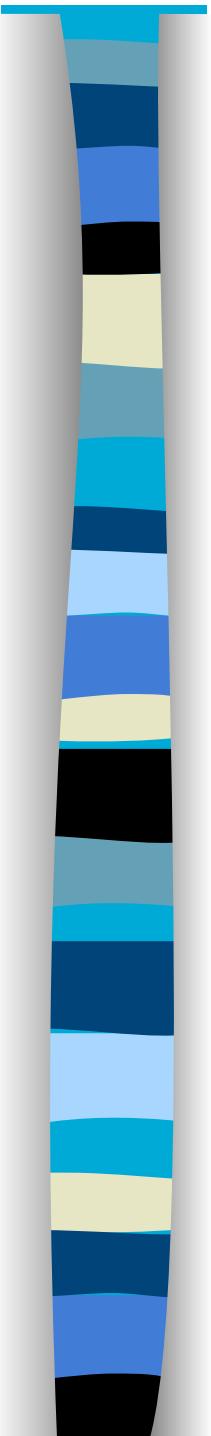


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Infants who receive massage:

- A. Receive the tactile stimulation they need for bone health
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Q

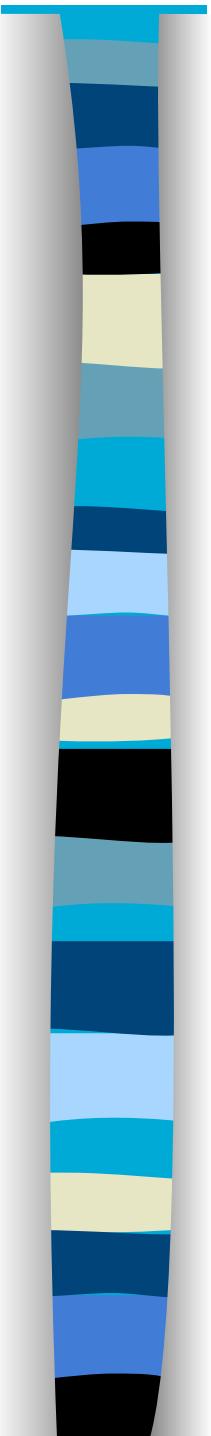


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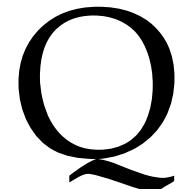
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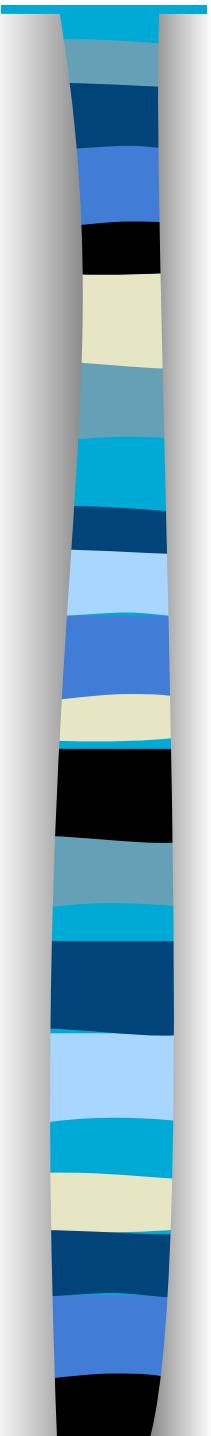


# Benefits of Massage for Infants

A practitioner's role during an infant massage session is to:

- A. Provide the parents an opportunity to run errands while keeping the child safely engaged for an hour
- B. Provide work that correctly addresses infant muscular tension
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- D. Educate parents about the benefits of massage and teach them how to apply basic strokes



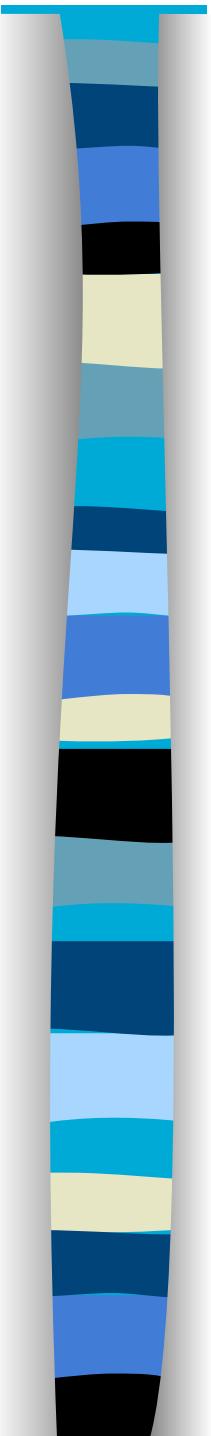


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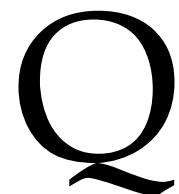
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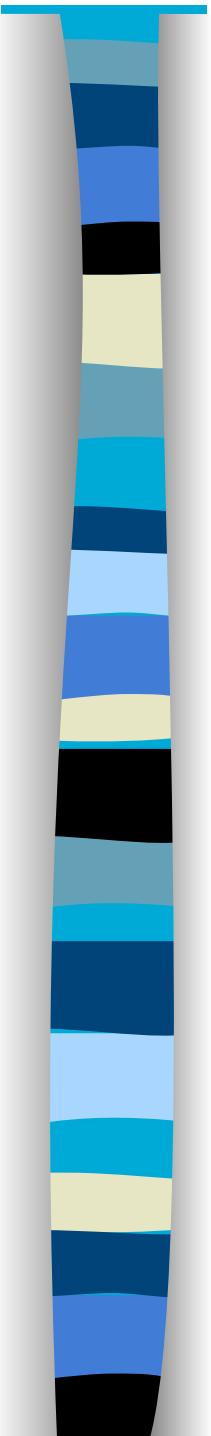


# Benefits of Massage for Infants

Ways to reduce the stimulation an infant experiences during a session include all of the following EXCEPT:

- A. Use quiet voices and continue to talk gently to the infant
- B. Turn up the lights so the infant doesn't feel like he or she is in the dark
- C. Wait to proceed
- D. Turn off the music



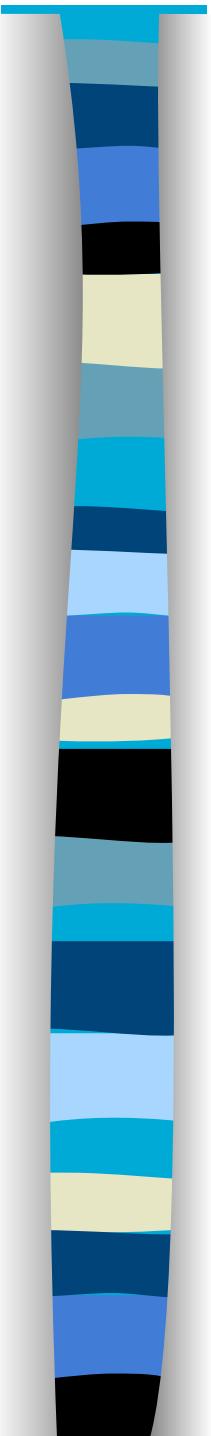


# Benefits of Massage for Infants

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# Benefits of Massage for Infants

## **Benefits of massage for infants**

- When infants receive massage:
  - Bonding between baby and caregivers increase
  - Digestion is improved
  - Neurological development is supported
  - Respiration slows and deepens
  - Sensory and motor nerves are stimulated
  - Sensory awareness is increased
  - Sleep quality is improved
  - Stress indicators are decreased
  - Socialization is increased

# Definition



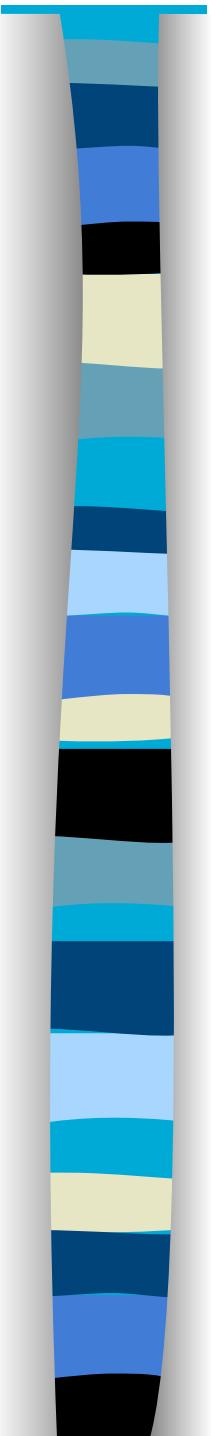




# ABMP Exam Coach

Special Populations:  
Clients who are Children

Cautions for Infant Massage

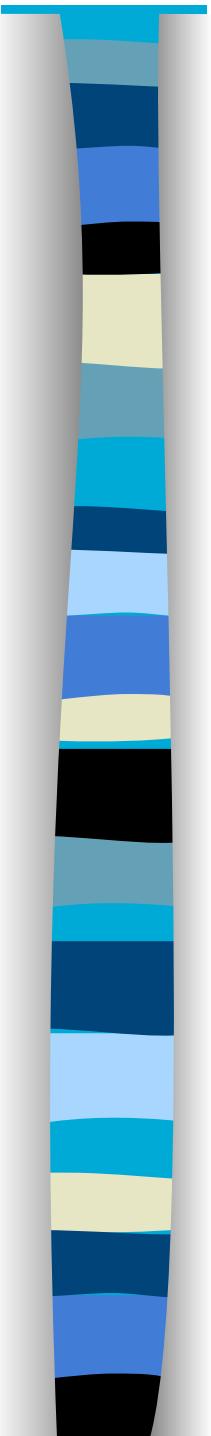


# Cautions for Infant Massage

A caution in infant massage is that a practitioner or parent might:

- A. Misread an infant's behavioral cues and provide too much stimulation
- B. Overload the cardiovascular system and cause heart arrhythmias
- C. Create muscular imbalances that lead to postural dysfunction in later years
- D. Be overly cautious and provide only light work to the infant's muscles



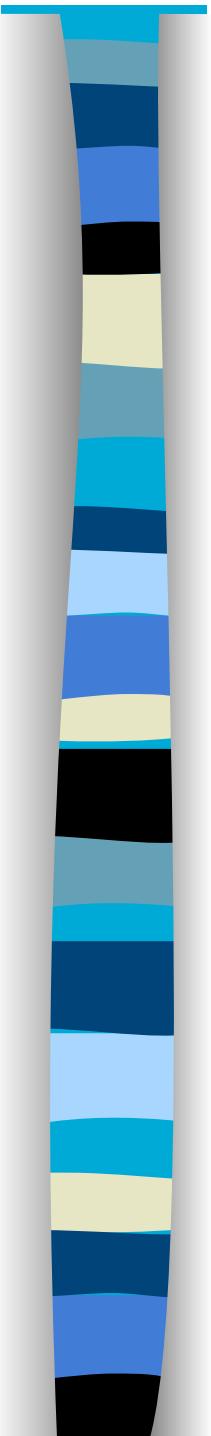


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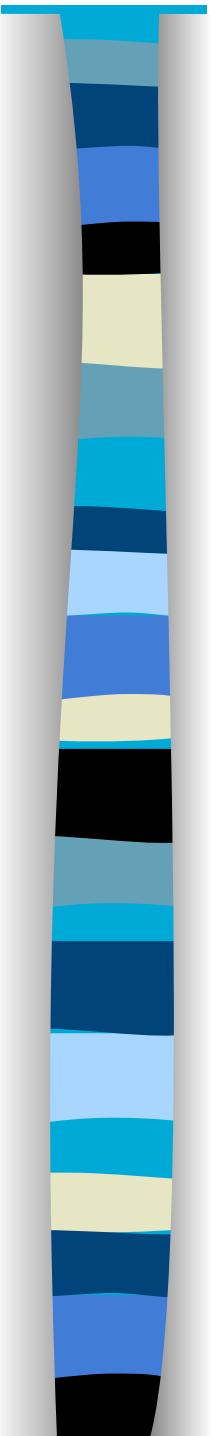


# Cautions for Infant Massage

If the infant is deeply asleep:

- A. Use massage strokes that stimulate the infant until he / she wakes up
- B. It is not the right time for massage
- C. Use warm hydrotherapy to open the session
- D. Use massage strokes that deepen the sleep state

Q

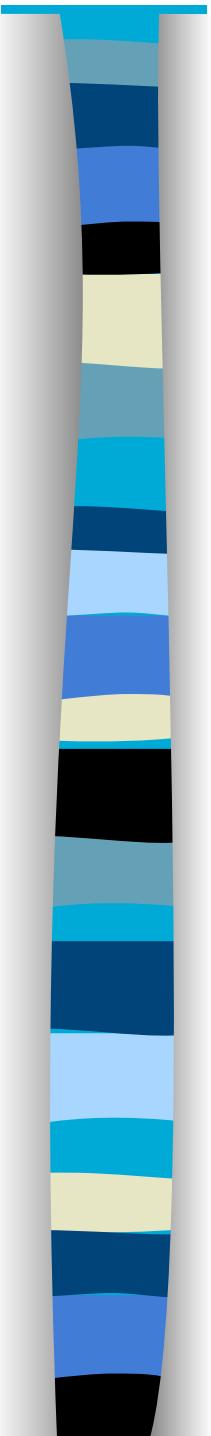


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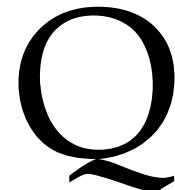
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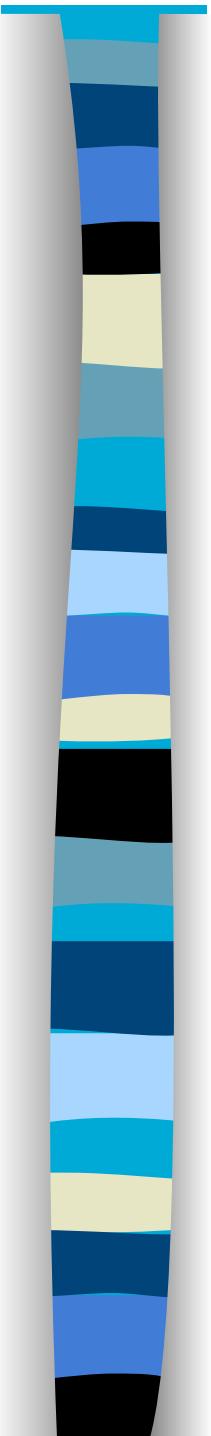


# Cautions for Infant Massage

Wait to provide massage after a child has been fed for:

- A. 1–2 hours
- B. 10–15 minutes
- C. 15–25 minutes
- D. At least 45 minutes



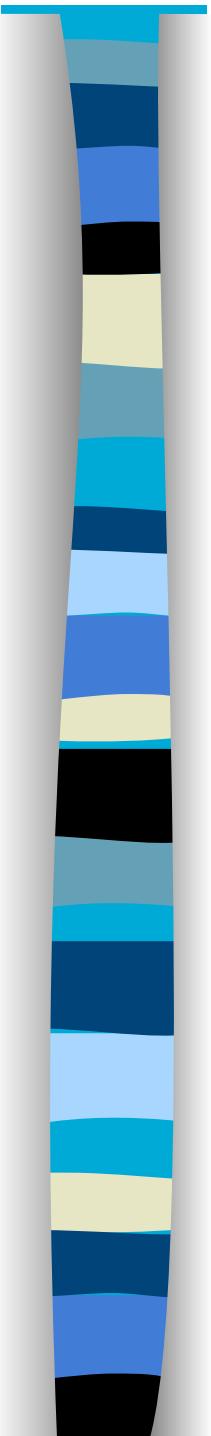


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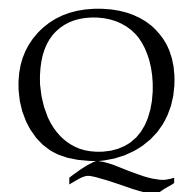
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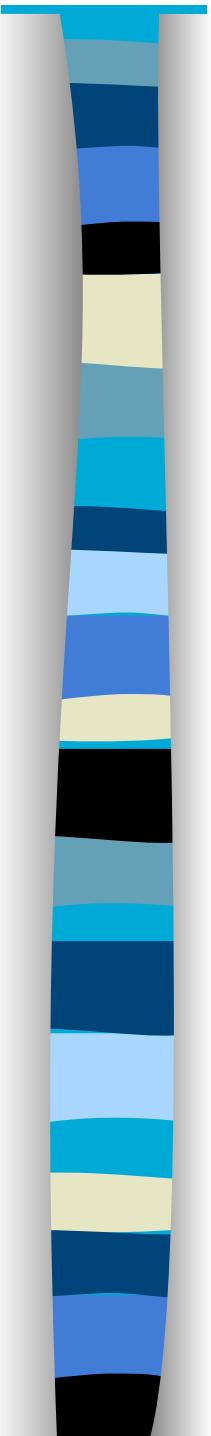


# Cautions for Infant Massage

Infant massage sessions last:

- A. An hour, just like massage for an adult
- B. 20–35 minutes, so long as the client is engaged
- C. 40–50 minutes, so long as the client is engaged
- D. 5–15 minutes, so long as the client is engaged



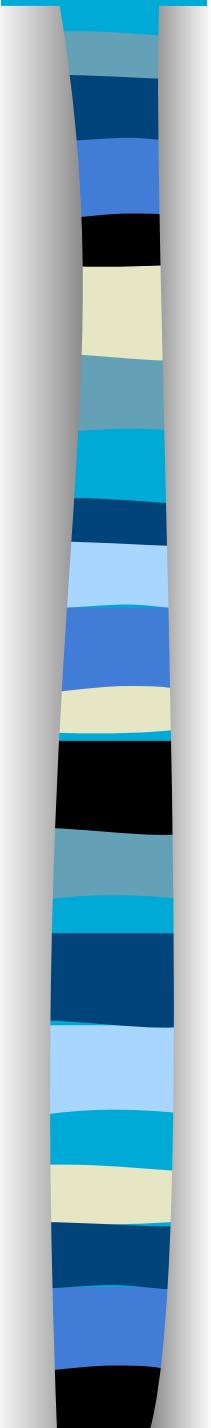


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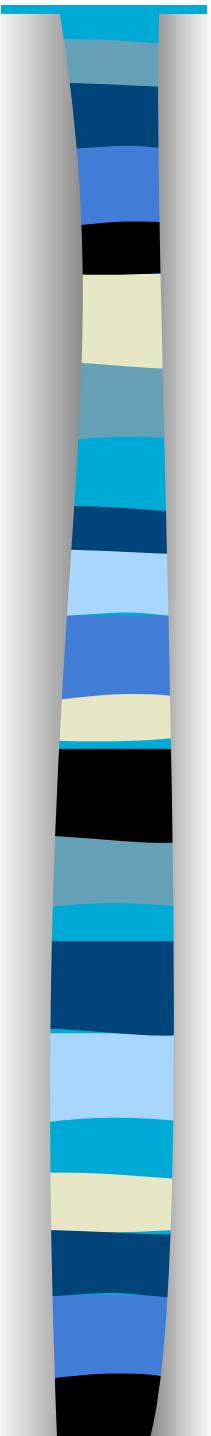


# Cautions for Infant Massage

If the infant has signs of nausea, then:

- A. Use gentle rocking strokes
- B. Massage is contraindicated
- C. Use warm hydrotherapy
- D. Use gentle gliding strokes

Q

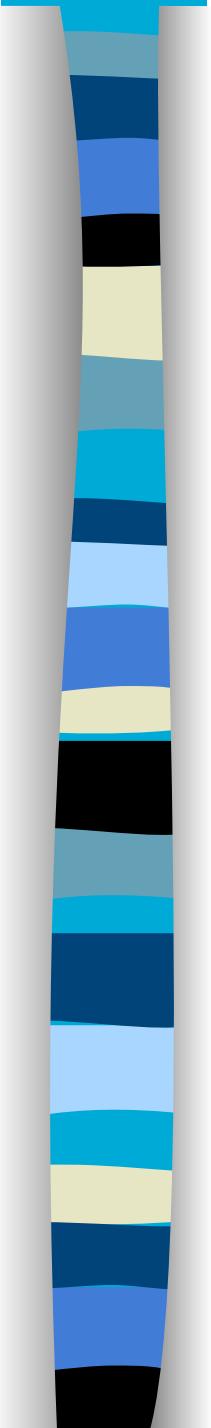


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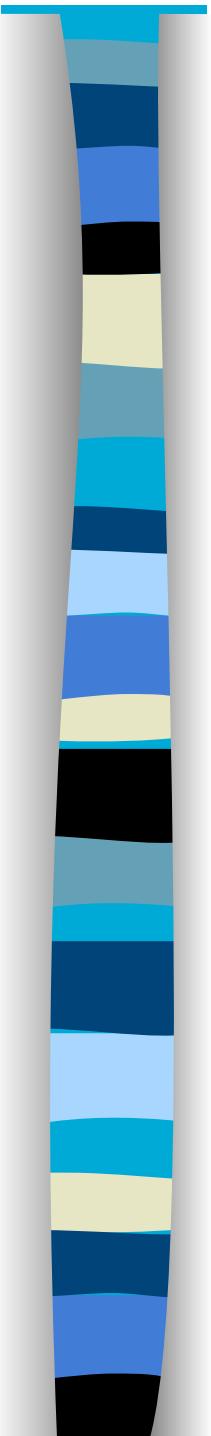


# Cautions for Infant Massage

If the infant is vomiting, then:

- A. Use cool hydrotherapy on the tummy
- B. Use gentle rocking strokes
- C. Massage is contraindicated
- D. Place the infant on his or her tummy during the session

Q

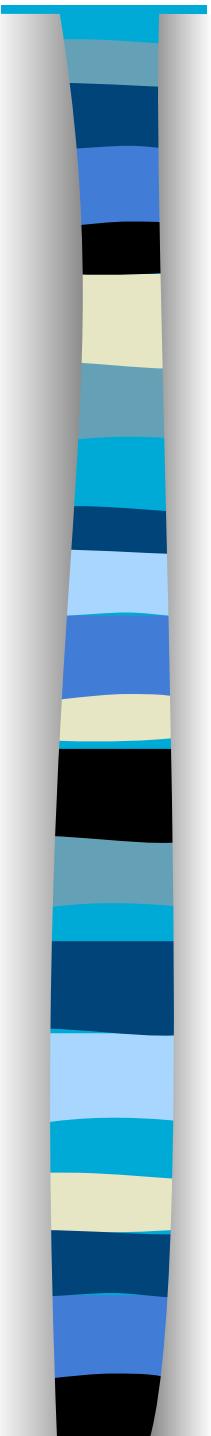


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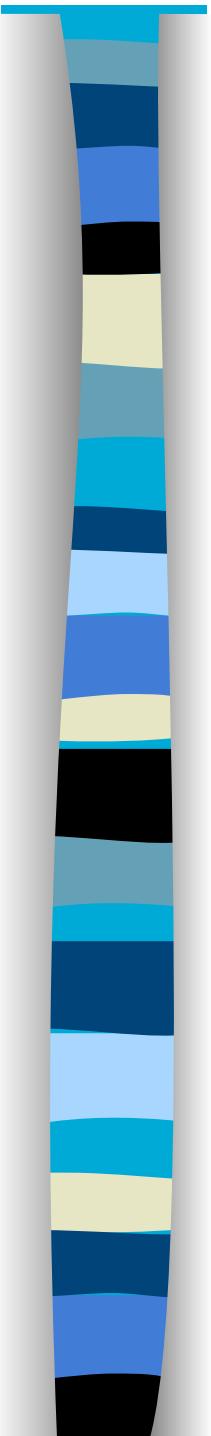


# Cautions for Infant Massage

Massage is contraindicated for an infant who is:

- A. Asleep
- B. Vocalizing and reaching toward a parent
- C. Making eye contact
- D. Vocalizing and reaching toward a practitioner

Q

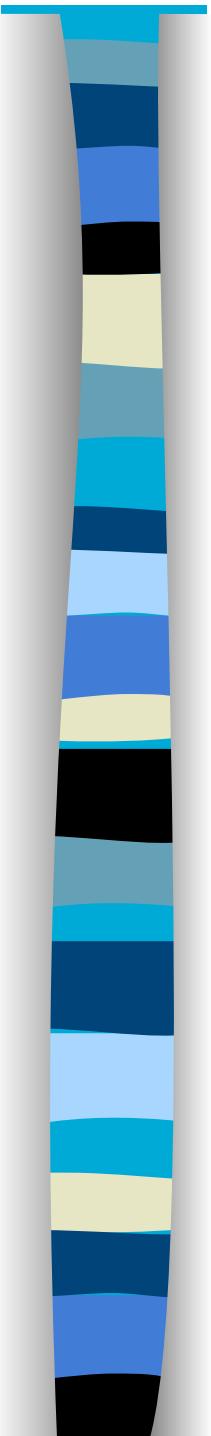


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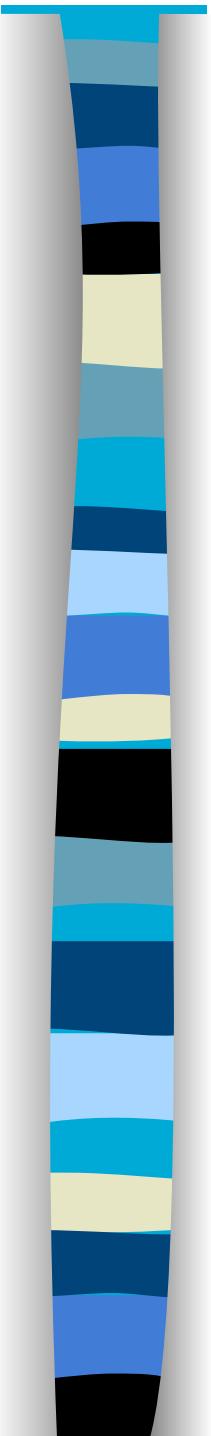


# Cautions for Infant Massage

The massage lubricant that is always used for infants is:

- A. Oil combinations with lavender or mandarin fragrance
- B. Cold-pressed natural food oils
- C. Warming massage gels
- D. Cooling massage gels

Q

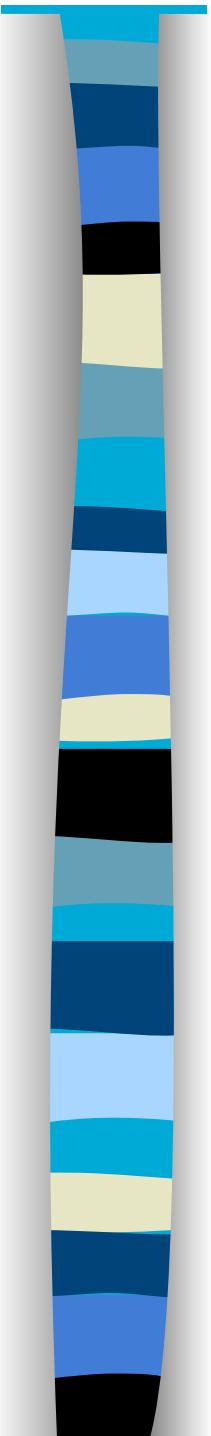


# Cautions for Infant Massage

The massage lubricant that is always used for infants is:

- A. Oil combinations with lavender or mandarin fragrance
- B. **Cold-pressed natural food oils**
  - Almond, sunflower, and coconut are some options.
- C. Warming massage gels
- D. Cooling massage gels

A

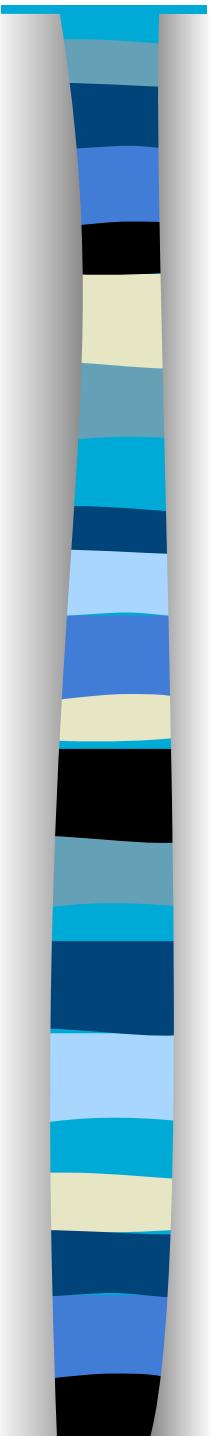


# Cautions for Infant Massage

**Cautions for infant massage** Cautions for infant massage (that ranges from 5–15 minutes) include:

- Misreading a baby's behavioral cues and providing too much stimulation, or providing massage too close to when a baby has been fed (wait 45 minutes after feeding before providing massage)
- Do not use regular massage lubricant on infants; use cold-pressed natural food oils to prevent babies from getting sick when they place their hands in their mouths
- If the baby has signs of nausea, vomiting, or diarrhea, he or she is contraindicated for massage.

# Definition



# Cautions for Infant Massage

**Cold-pressed natural food oils** The type of oil used as the lubricant for infant massage.

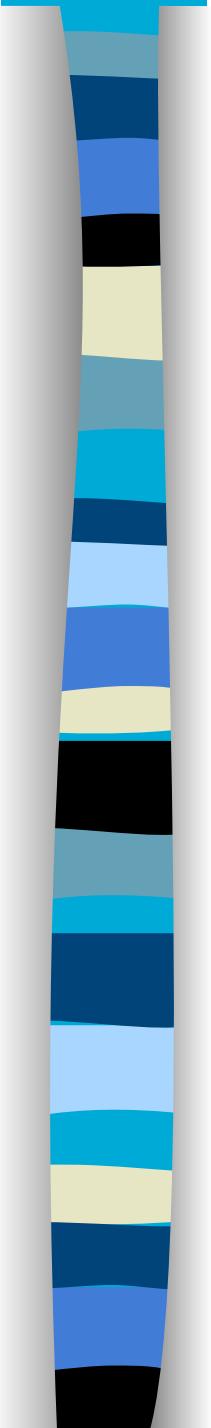
- Babies often place their hands in their mouths and could get sick from exposure to the synthetic dyes, fragrances, and chemicals in many massage lubricants.

# Definition





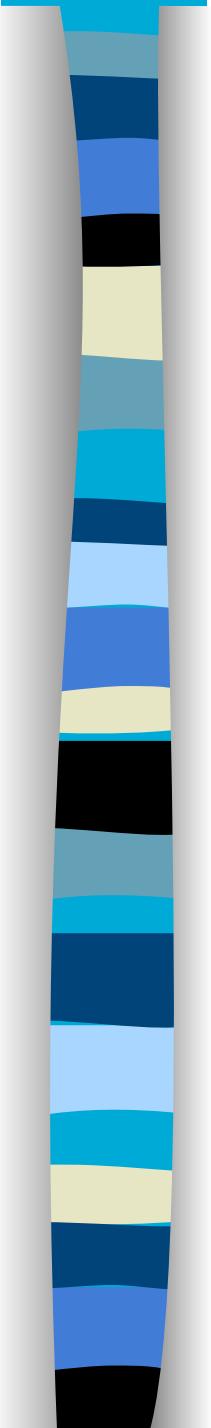




# ABMP Exam Coach

Special Populations:  
Clients who are Children

Child Development

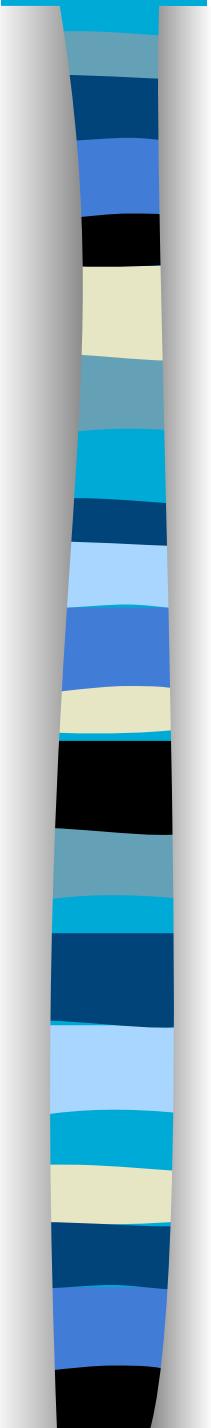


# Child Development

Crawlers and toddlers are mobile. During a session:

- A. Ask a parent to gently restrain the child so that he / she can receive massage
- B. Turn the massage into play by singing to keep the child engaged
- C. Let the child know that crawling off will not be accepted
- D. Let the child run around but remind the parents they still owe you for the session

Q

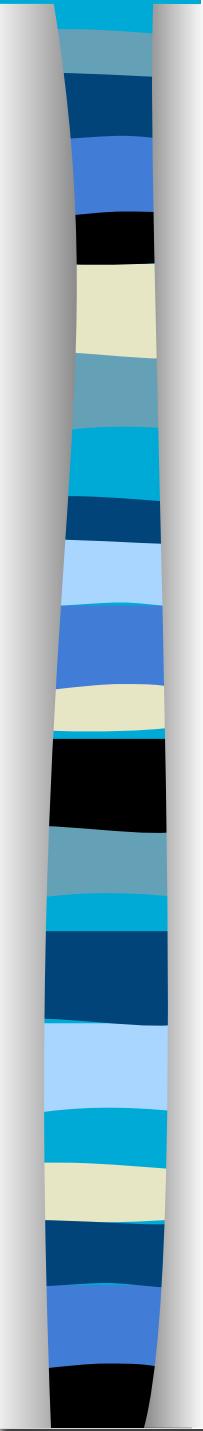


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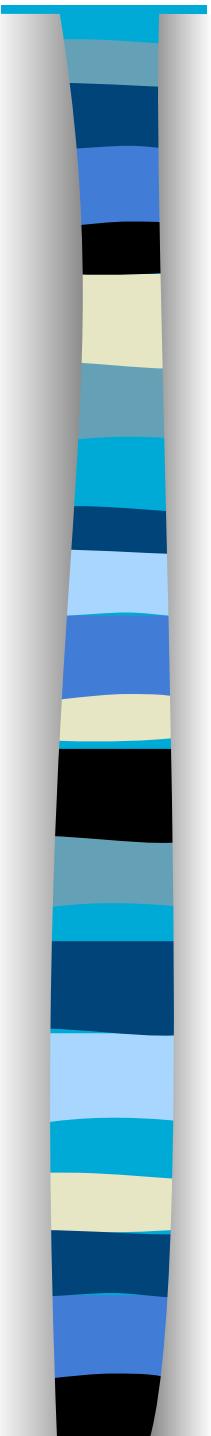


# Child Development

Infants who receive massage:

- A. Experience enhanced brain size
- B. Experience reduced muscle hypertonicity
- C. Experience enhanced digestion
- D. Experience better flexibility throughout life

Q

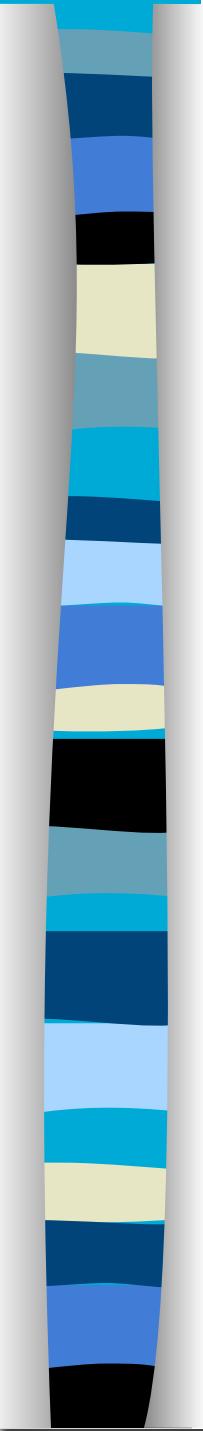


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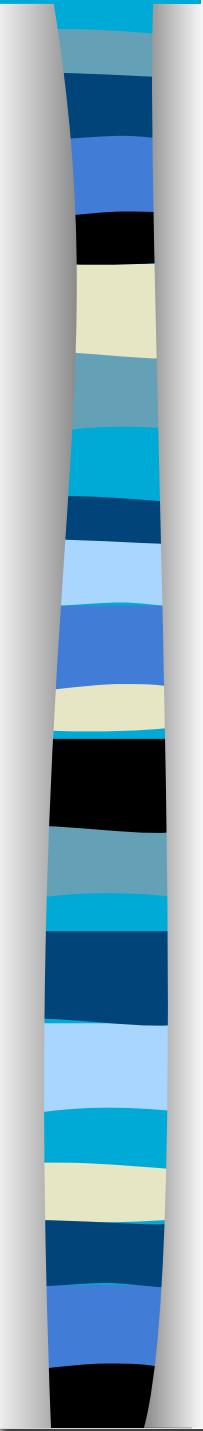


# Child Development

Infants who receive massage:

- A. Demonstrate the ability to stand sooner than infants who don't receive massage
- B. Demonstrate the ability to walk sooner than infants who don't receive massage
- C. Experience enhanced brain size
- D. Demonstrate increased vocalization, which aids speech development

Q

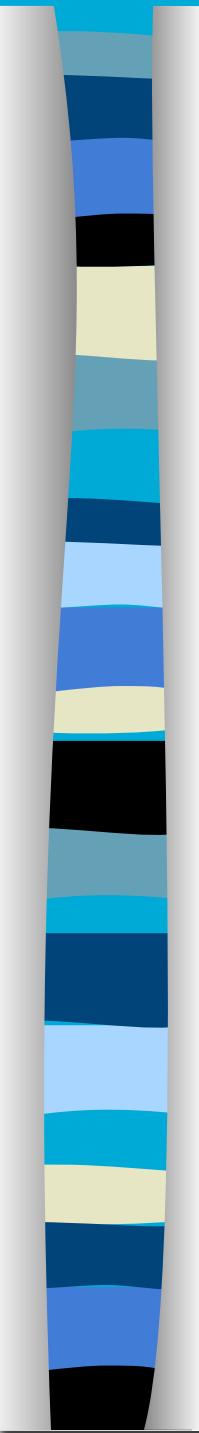


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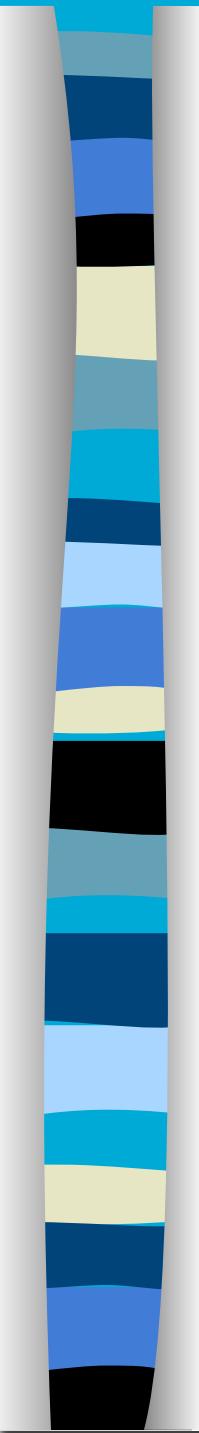


# Child Development

## Locomotion (child development)

- The first movements an infant makes on his/her own including:
  - “Creeping” (pushing self around on the stomach)
  - “Scooting” (crawling on one leg and dragging the other)
  - Combinations of rolling, rocking, and squirming.
- Between 6–8 months of development, infants progress to hands-and-knees crawling.
- Some babies skip crawling and progress directly to walking.

# Definition

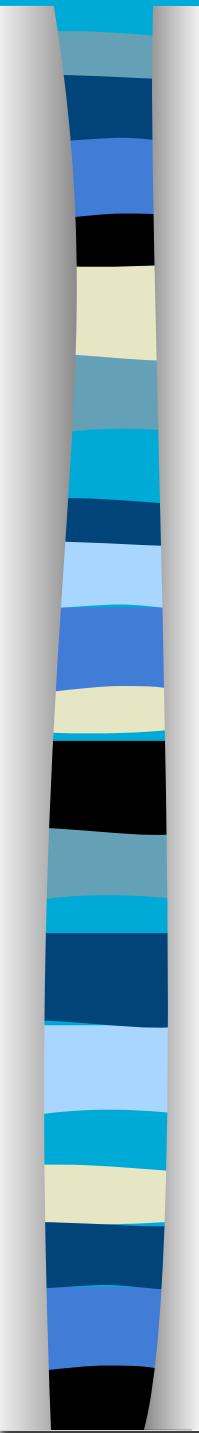


# Child Development

**Tactile stimulation (child development)** The activation of sensory receptors in the skin by touch.

- History and research shows that tactile stimulation is essential for child development.
- In the early 20th century, children in orphanages in America and Europe died in alarming numbers from touch deprivation. Those that did survive experienced delayed bone growth, low weight, suppressed immunity, poor coordination, general apathy, and decreased mental function.
- Touch is essential for life, proper development, and good health.

## Definition

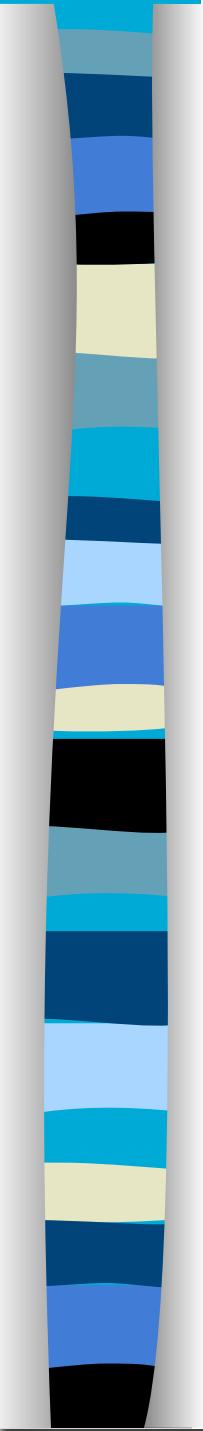


# Child Development

**Tiffany Field (research on preterm infants)** A researcher who has extensively studied the benefits of massage for preterm infants at the Touch Research Institute.

- Her research shows that massage:
  - Stimulates growth
  - Aids digestion
  - Positively affects sympathetic and adrenocortical function
  - Aids sleep
  - Decreases fussing, crying, and behaviors related to stress such as hiccapping

## Definition



# Child Development

**Vocalization (child development)** The early sounds made by infants and toddlers as they develop speech including babbling, cooing, or sounds like "ba" and "ma."

- Increased positive vocalization is a behavioral cue for contentment and relaxation, as opposed to crying sounds.

## Definition



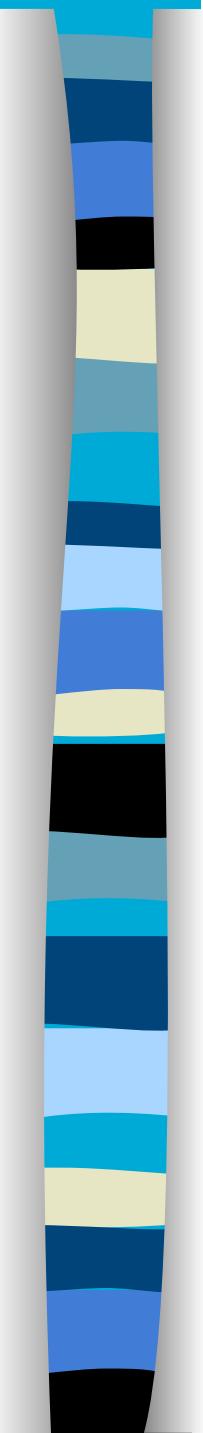




# ABMP Exam Coach

Special Populations:  
Clients who are Pregnant

Trimesters



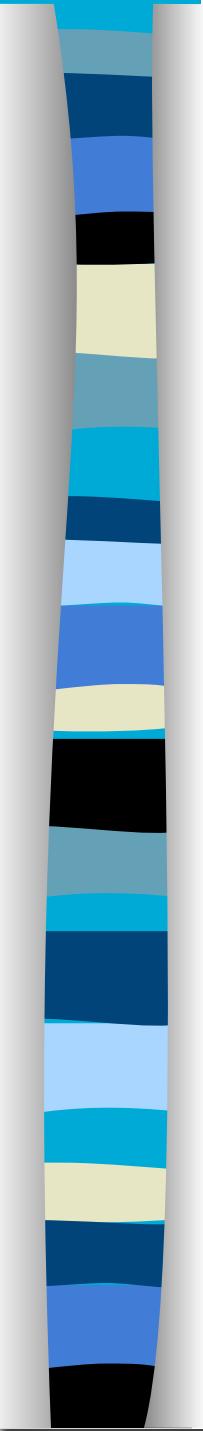
# Trimesters

One change that a woman's body goes through in the first trimester is:

- A. Pregnancy posture causes difficulty walking and bending over
- B. Back pain occurs
- C. Body temperature increases

Body temperature decreases

Q



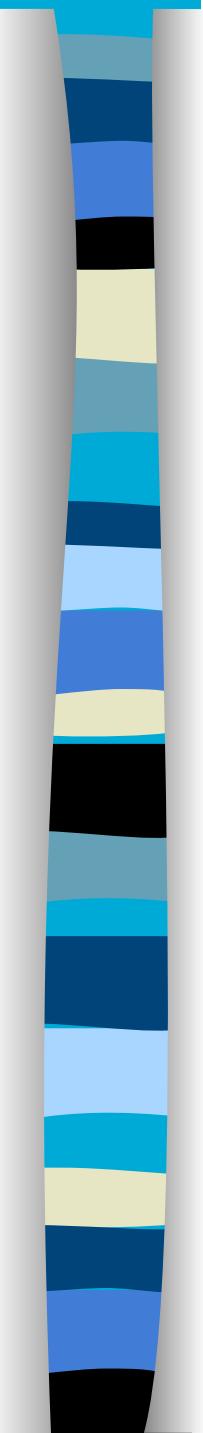
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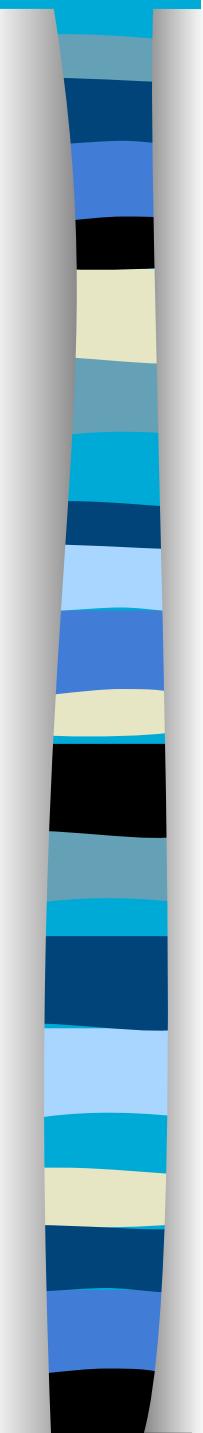


# Trimesters

One change that a woman's body goes through in the first trimester is:

- A. Hormonal changes cause fatigue, nausea, and smell sensitivity
- B. Breathing becomes more shallow as the diaphragm moves upward
- C. Edema may be present in the legs, ankles, and feet
- D. Baby movement felt toward the end of the trimester

Q

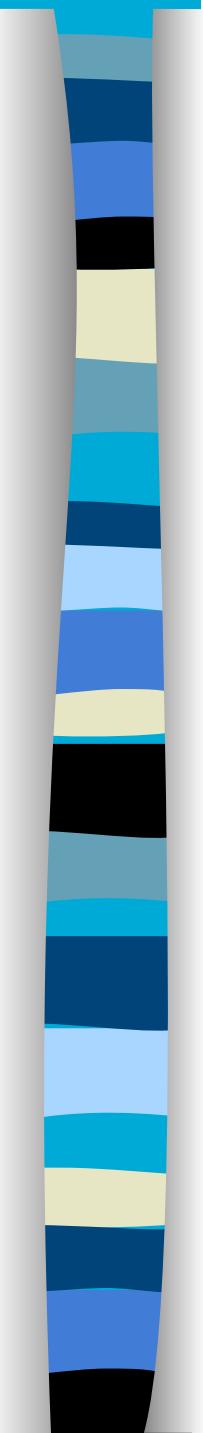


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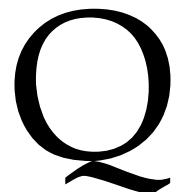
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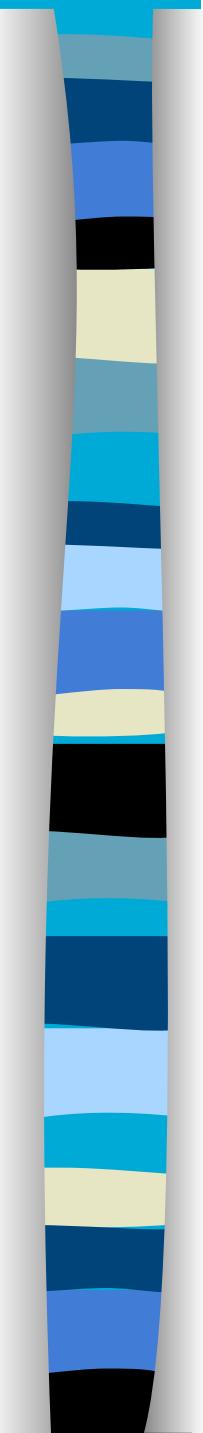


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One change that a woman's body goes through in the first trimester is:

- A. Body temperature decreases
- B. Baby movement felt toward the end of the trimester
- C. Heart rate and blood volume increase
- D. Edema may be present in the legs, ankles, and feet



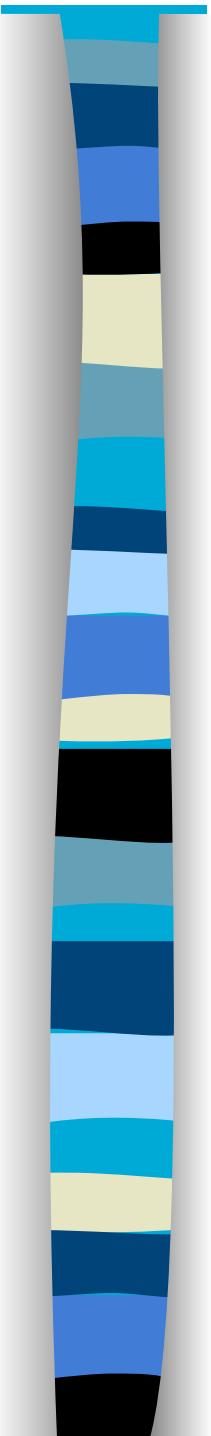


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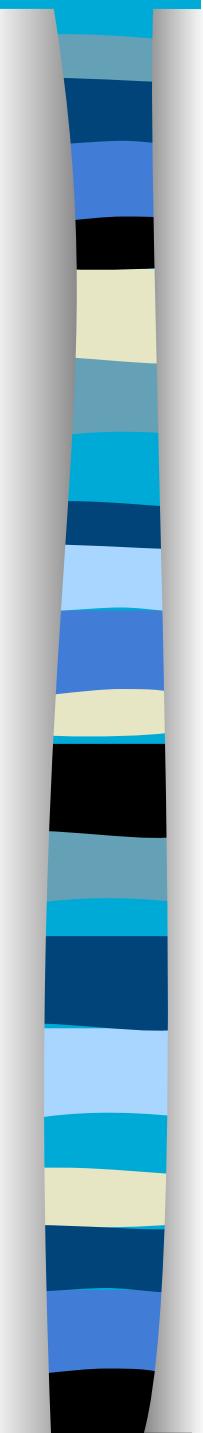


# Trimesters

If a pregnant client arrives at your clinic and complains of foot pain during the second trimester, massage:

- A. Requires a physician's release
- B. Of the feet is a local contraindication
- C. Is indicated
- D. Is contraindicated

Q

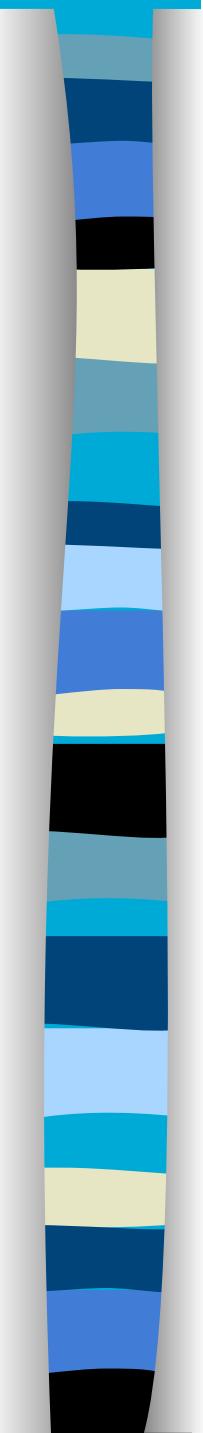


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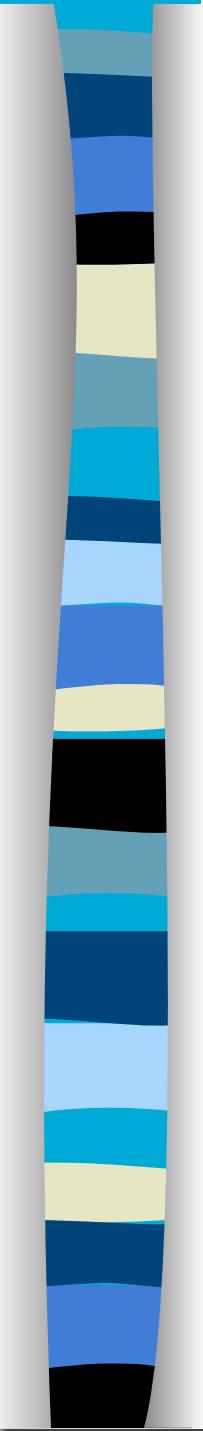


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One change that a woman's body goes through in the second trimester is:

- A. Hormonal changes cause fatigue, nausea, and smell sensitivity
- B. Body temperature increases
- C. Posture changes cause muscular stresses
- D. Shortness of breath occurs as the uterus moves up into the rib cage

Q

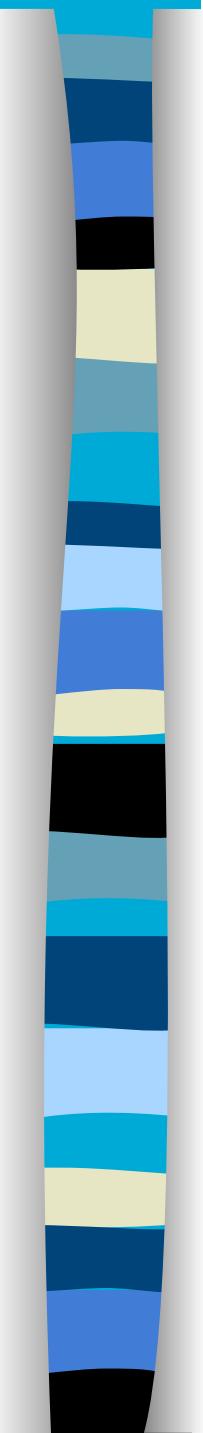


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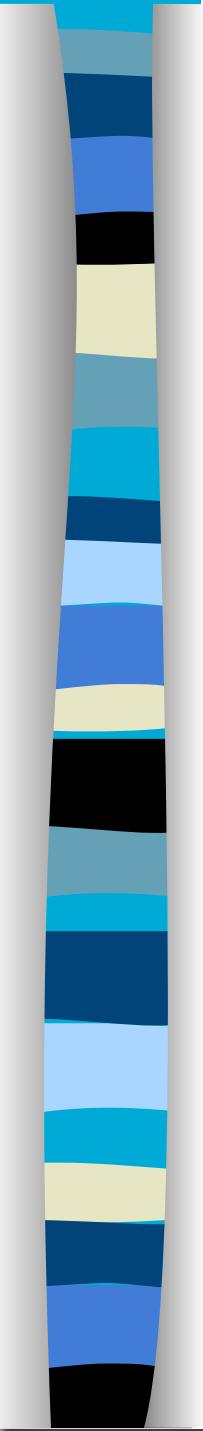


# Trimesters

One change that a woman's body goes through in the second trimester is:

- A. The linea alba begins to separate
- B. Relaxin present at week 10
- C. Body temperature increases
- D. Carpal tunnel syndrome may develop

Q

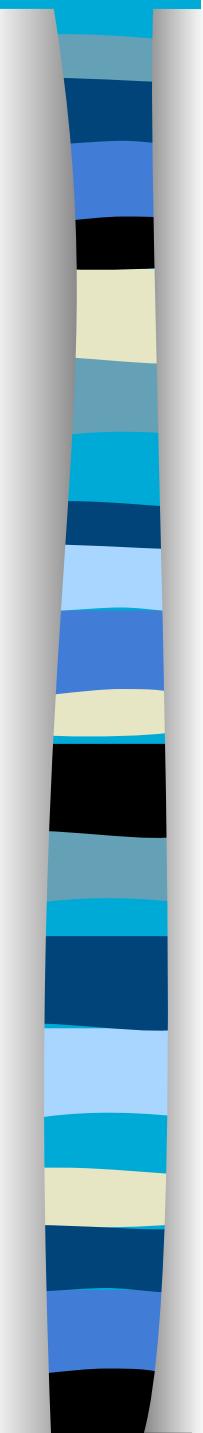


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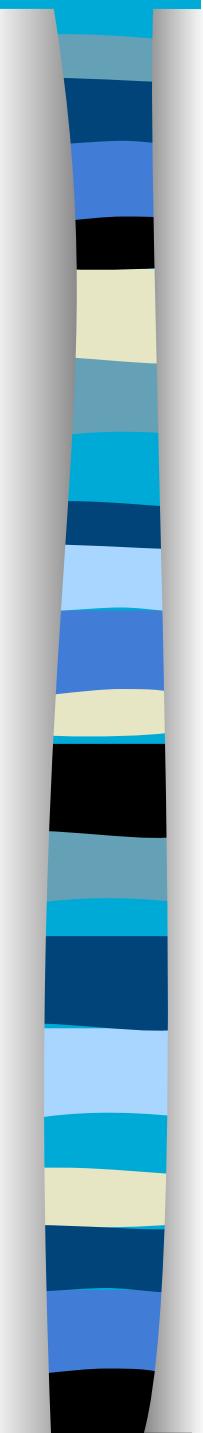


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Q

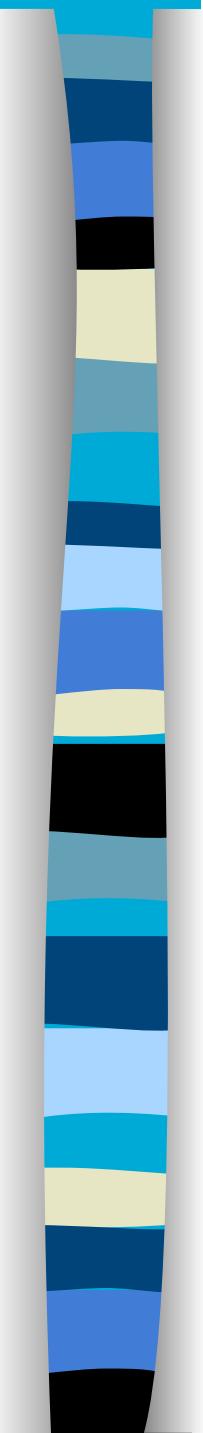


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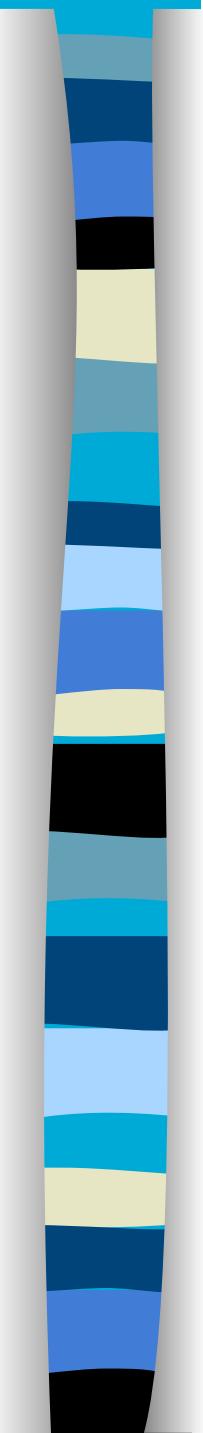


# Trimesters

One change that a woman's body goes through in the third trimester is:

- A. Relaxin present at week 10
- B. Pregnancy posture increases difficulty walking and bending over
- C. Heart rate and blood volume increases
- D. Linea alba begins to separate

Q

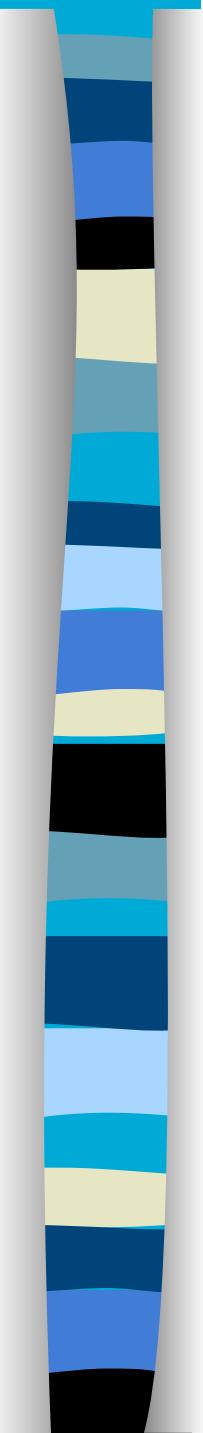


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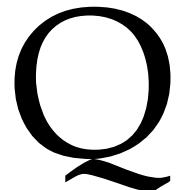
A

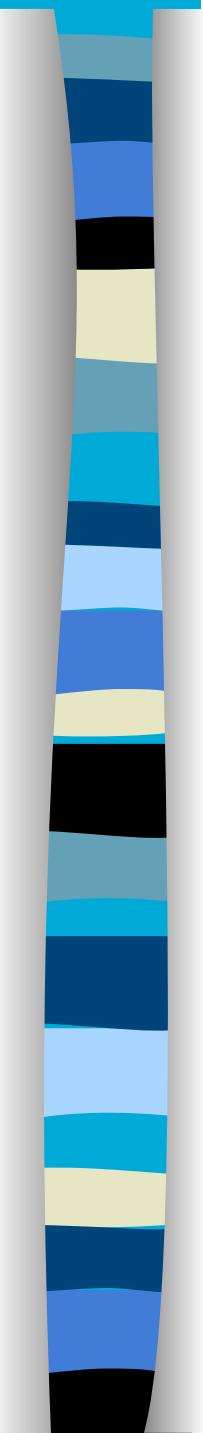


# Trimesters

One change that a woman's body goes through in the third trimester is:

- A. Baby movement felt toward the end of the trimester
- B. Carpal tunnel syndrome may develop
- C. Hormonal changes cause fatigue, nausea, and smell sensitivity
- D. Body temperature increases



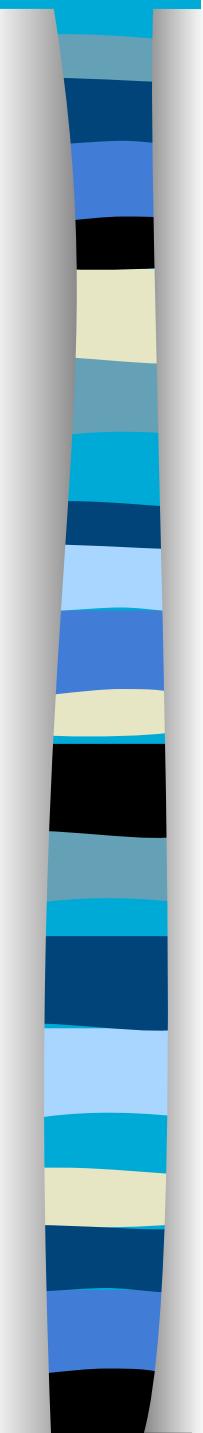


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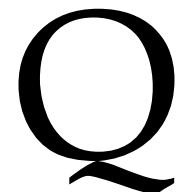
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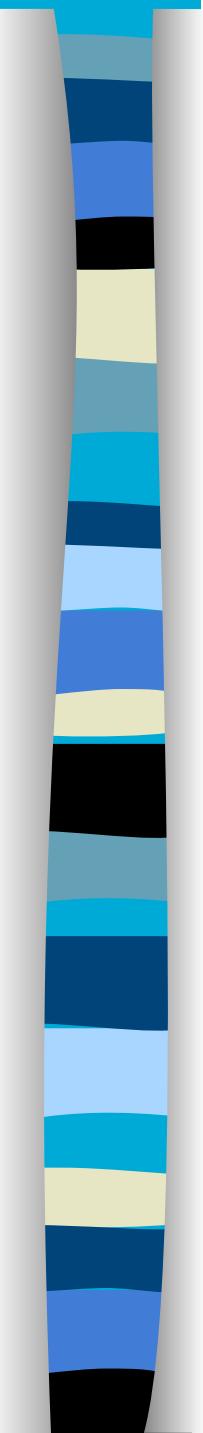


# Trimesters

One change that a woman's body goes through in the third trimester is:

- A. Baby movement felt toward the end of the trimester
- B. Heart rate and blood volume increases
- C. Pressure from growing baby that presses on nerves, blood vessels, and internal organs
- D. Hormonal changes cause fatigue, nausea, and smell sensitivity



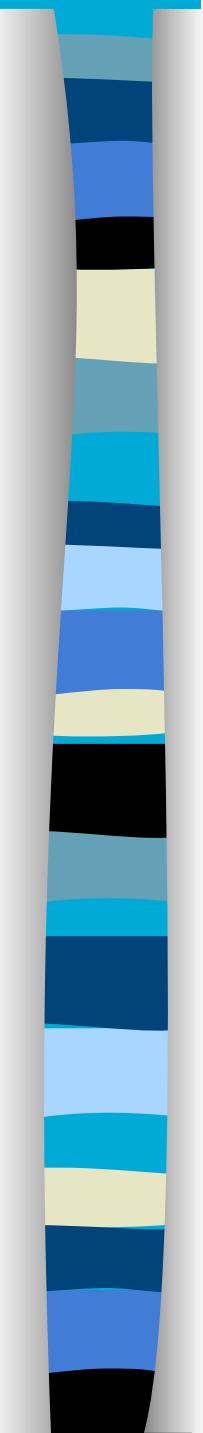


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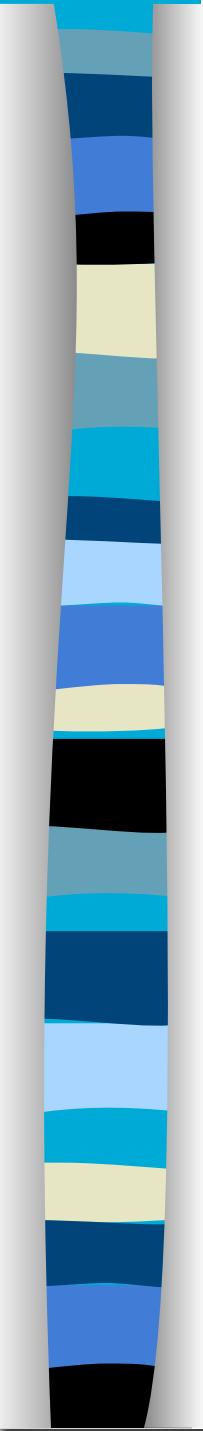


# Trimesters

When a pregnant woman in the late second or third trimester is positioned in this manner, the weight of the fetus could impinge on the abdominal aorta and inferior vena cava:

- A. Side-lying
- B. Prone
- C. Supine
- D. Seated

Q

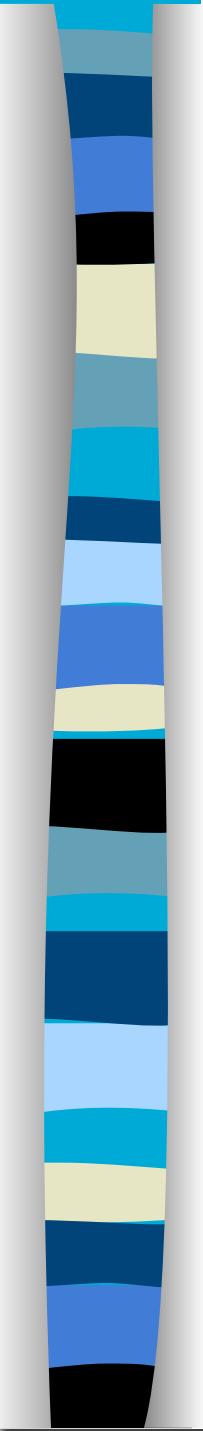


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- A. Side-lying
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- C. Supine**
- D. Seated

A



# Trimesters

## **Conception**

The process of becoming pregnant through the union of the male sperm and female ovum (fertilization producing a zygote) followed by implantation in the womb and the resulting entity (embryo).

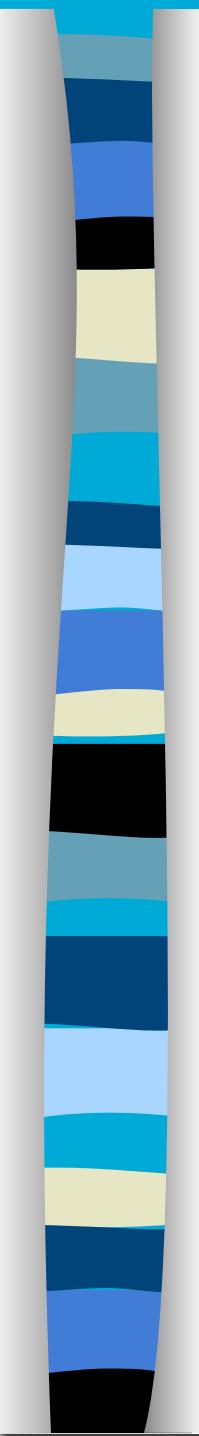
## **Prenatal**

Occurring or existing before birth.

## **Pregnancy**

The state of carrying a developing embryo or fetus within the female body. Pregnancy lasts approximately 9 months, measured from the date of a woman's last menstrual period, and is divided into three timeframes called trimesters, each roughly 3 months long.

# Definition



# Trimesters

## **Embryo (pregnancy)**

The pre-fetal product of conception, from implantation through week 8 of development.

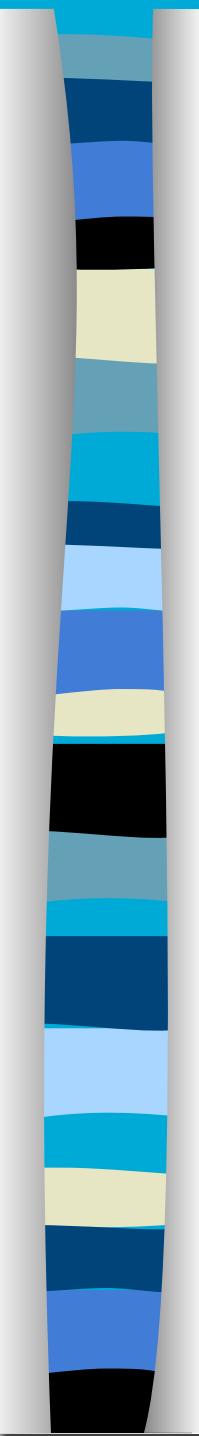
## **Zygote**

The one-celled organism resulting from a fertilized female egg (ovum). Zygotes undergo a 2-week period between fertilization and implantation of rapid cell division before they become an embryo.

## **Fetus**

An unborn offspring, from the embryo stage (the end of week 8 after conception) when major structures have formed until birth.

# Definition



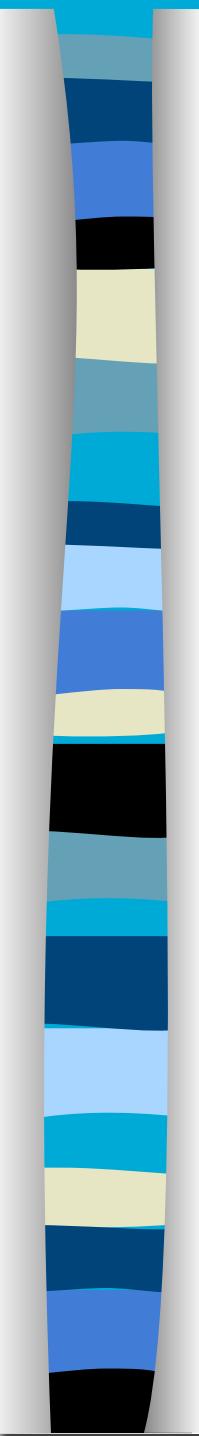
# Trimesters

**First trimester** The first of three divisions during pregnancy (roughly 3 months each), in which different phases of fetal development take place. The first trimester is a time of basic cell differentiation.

Common changes that occur in a pregnant woman's body during the first trimester include:

- The presence of relaxin at week 10. Hormonal changes that can cause headaches, fatigue, nausea, constipation, mood swings, smell and taste sensitivity, and possible vomiting.
- Increased urination frequency
- Increased blood volume
- Increased body temperature
- Increased heart rate
- increased metabolism
- Increased uterus size

## Definition

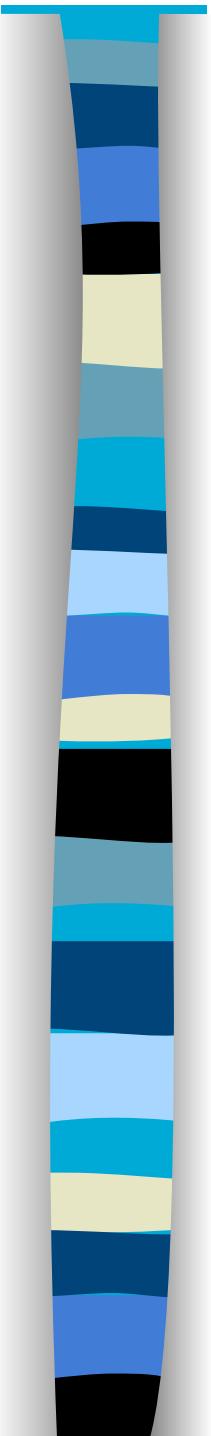


# Trimesters

**Second trimester** The second of three divisions during pregnancy (roughly 3 months each), in which different phases of fetal development take place. The second trimester is a period of rapid growth and maturation of body systems.

- Common changes that occur in a pregnant woman's body during the second trimester include:
  - Baby movement felt toward the end of the trimester
  - Back pain
  - Tender and swollen breasts
  - More shallow breathing as the diaphragm moves upward
  - The separation of the linea alba, muscle cramping, organ displacement to accommodate the growing fetus, an expanding pelvis, postural changes, the appearance of stretch marks, increased weight, and edema in the legs, ankles, and feet.

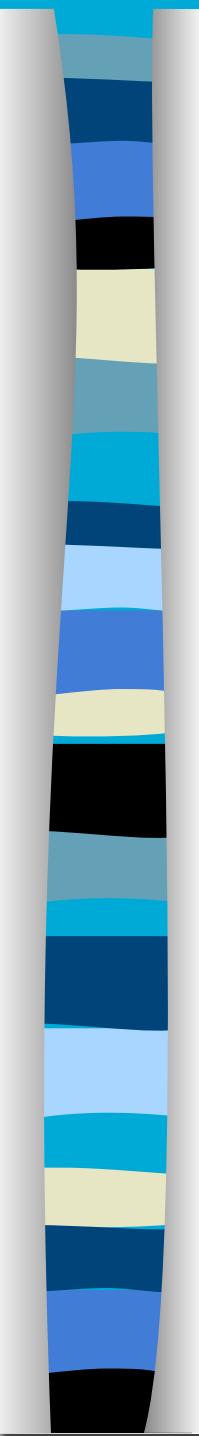
## Definition



# Trimesters

**Third trimester** The last of three divisions during pregnancy (roughly 3 months each), in which different phases of fetal development take place. The third trimester is a period in which body systems are completed, fat accumulates under the baby's skin, and the fetus moves into position for birth. The third trimester ends with birth.

- Common changes that occur in a pregnant woman's body during the third trimester include:
  - Carpal tunnel syndrome
  - Varicose veins
  - Hemorrhoids
  - Heartburn
  - Insomnia
  - Increased pregnancy posture (causing tension to muscles and joints and making walking and bending over difficult)
  - Shortness of breath as the uterus moves up into the rib cage
  - Edema in the lower extremities
  - Increased pressure on nerves, blood vessels, and internal organs as the baby grows to term



# Trimesters

## Positioning pregnant clients

- During the first trimester, use supine, prone, side-lying, and semireclined positions.
- During the second trimester, use supine, side-lying, and semireclined positions.
- From the late second trimester through the third trimester, use side-lying and semireclined positions.

# Definition



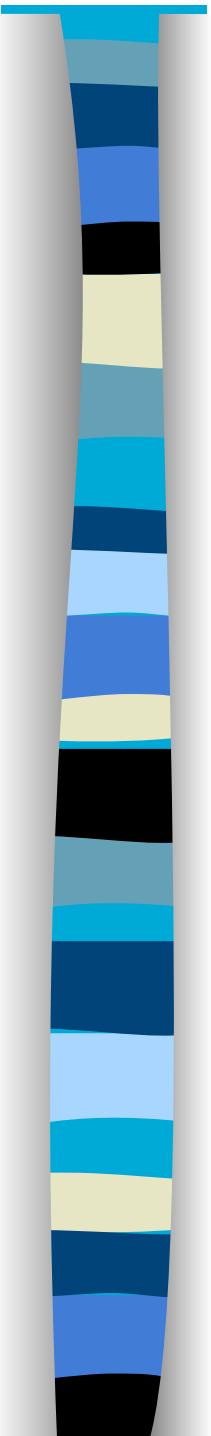




# ABMP Exam Coach

Special Populations:  
Clients who are Pregnant

Delivery

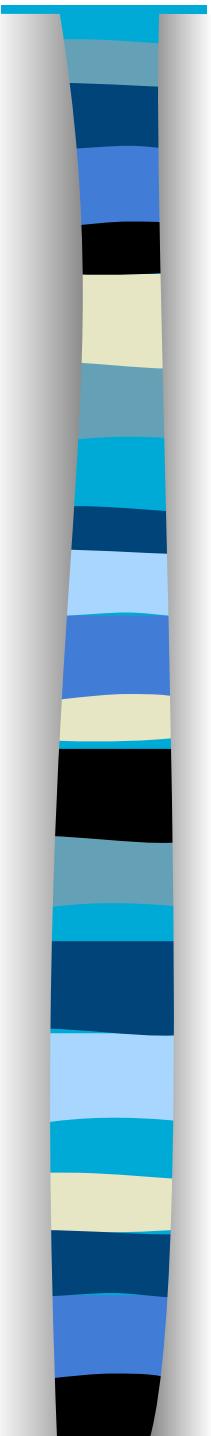


# Delivery

Relaxin is:

- A. A hormone produced during pregnancy that causes carpal tunnel syndrome
- B. A hormone produced during pregnancy that causes edema in the lower legs, ankles, and feet
- C. A hormone produced during pregnancy that causes arm and shoulder pain
- D. A hormone produced during pregnancy that causes the cervix and pubic symphysis to soften and lengthen

Q

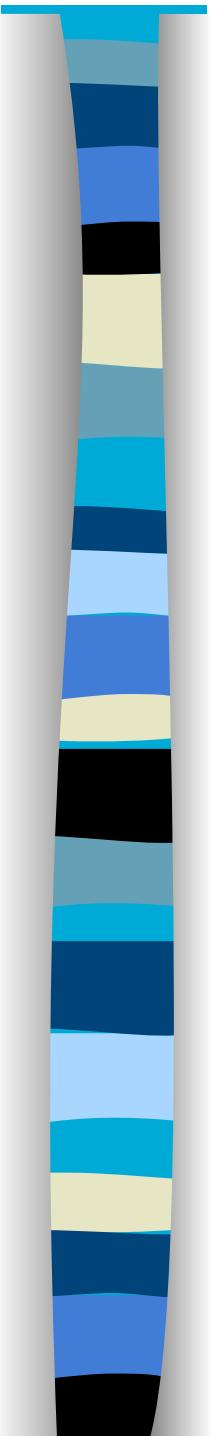


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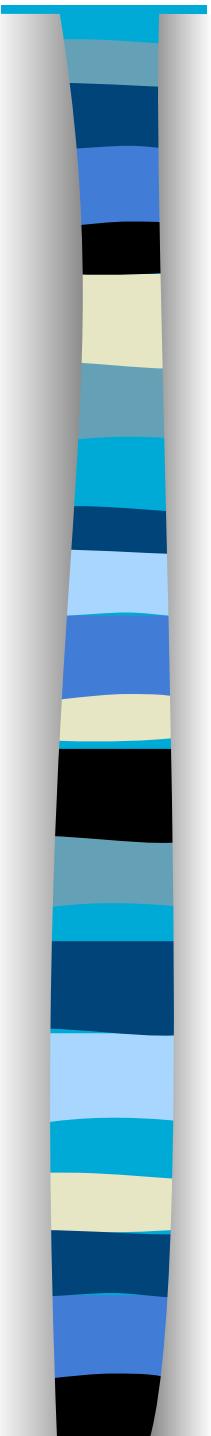


# Delivery

Relaxin causes:

- A. The production of scar tissue that forms the linea alba
- B. The production of elastin to decrease and elastin breakdown to increase
- C. The production of lymph proteins and the accumulation of fluids in tissue
- D. The production of collagen to decrease and collagen breakdown to increase

Q

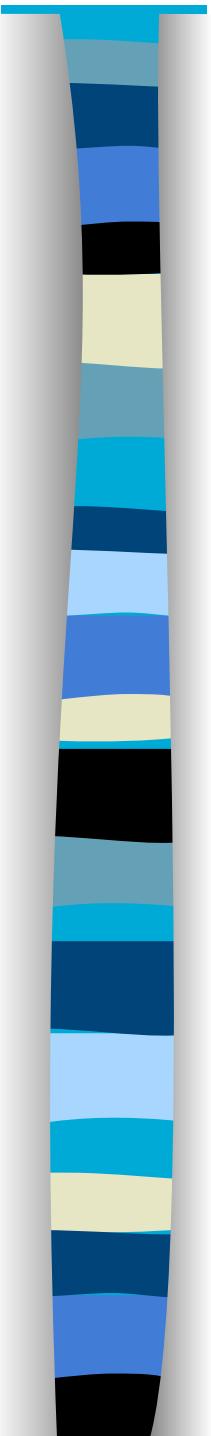


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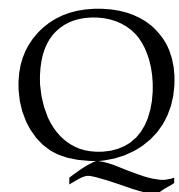
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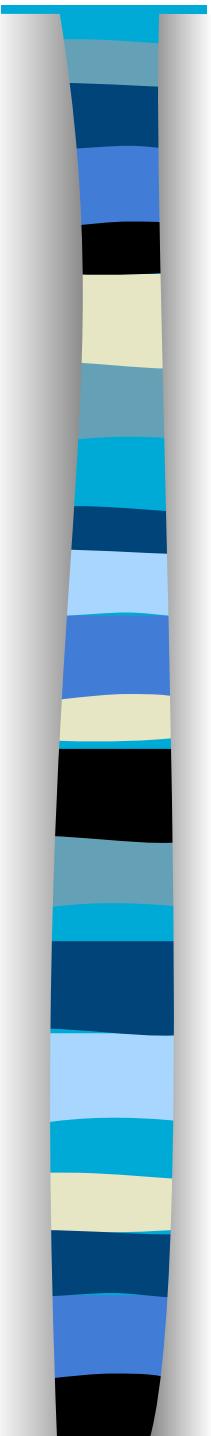


# Delivery

Myofascial release massage or connective tissue techniques for clients who are pregnant are:

- A. Avoided due to the presence of relaxin in the client's body
- B. Locally encouraged, especially for abdominal massage
- C. Encouraged due to the presence of relaxin in the client's body
- D. Locally contraindicated when providing abdominal massage



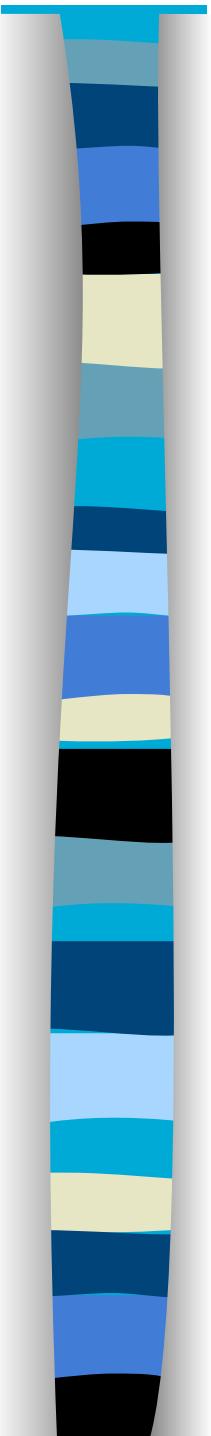


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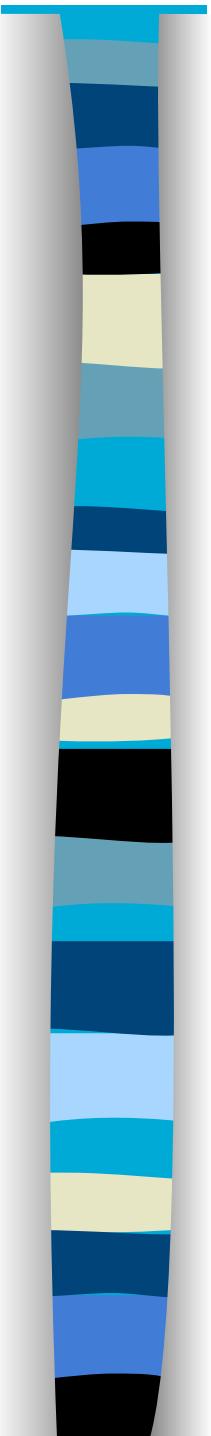


# Delivery

If the client received an epidural for pain relief during delivery:

- A. Avoid the injection area for 8 hours after the procedure
- B. Massage is contraindicated for two weeks post-delivery
- C. Avoid the injection area for 72 hours after the procedure
- D. The entire back and gluteal region are contraindicated for two weeks post-delivery

Q

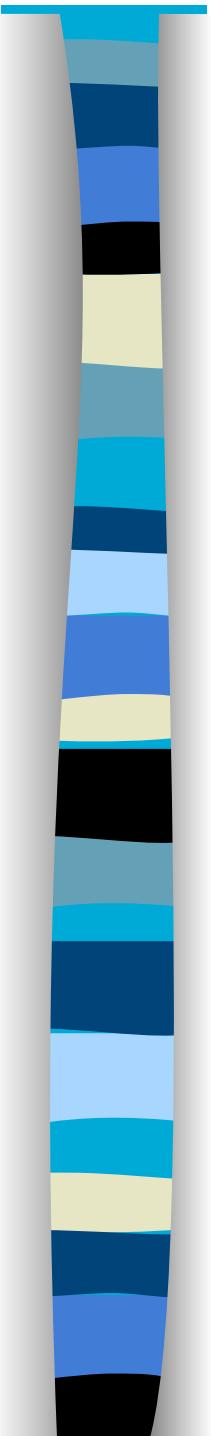


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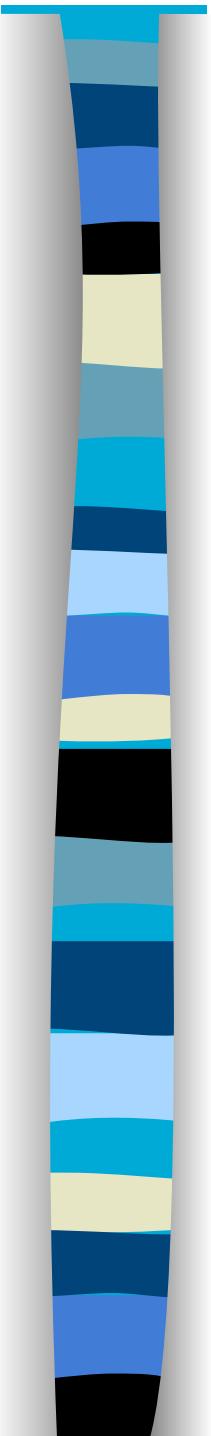


# Delivery

If the client had a normal vaginal birth:

- A. Vaginal bleeding is normal for 2 weeks after delivery and is not a contraindication
- B. Vaginal bleeding could be abnormal and always requires a physician's release
- C. Vaginal bleeding is not normal after delivery and is an absolute contraindication
- D. Vaginal bleeding indicates a local contraindication and the back, gluteal muscles, and thighs should not be massaged

Q

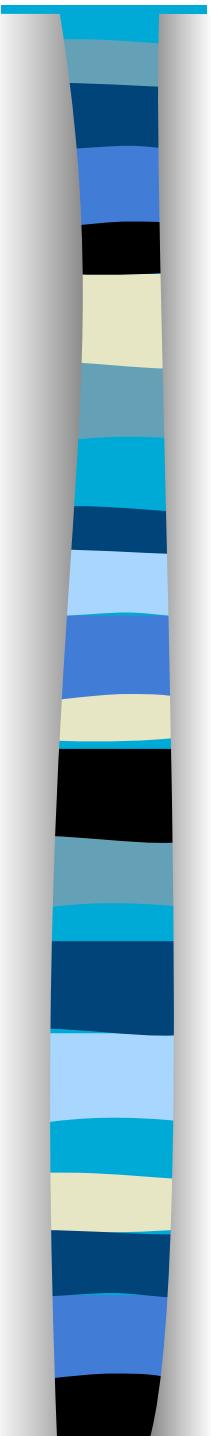


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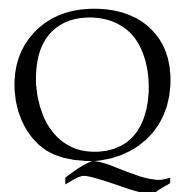
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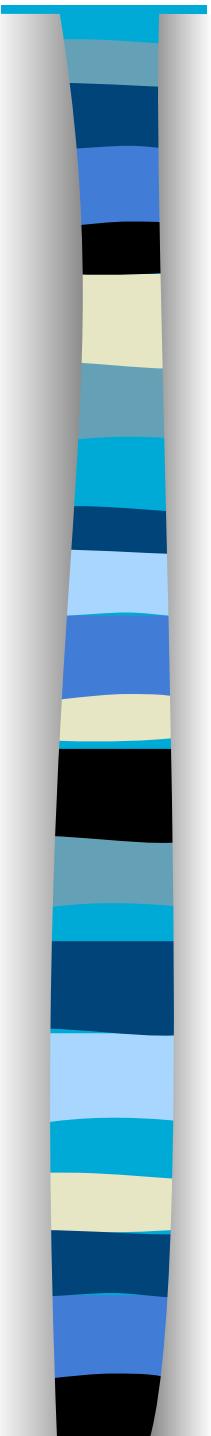


# Delivery

If the client had a C-section birth, massage can only be provided in these positions for eight weeks after delivery:

- A. Prone and supine positions
- B. Seated position only
- C. Side-lying and supine positions
- D. Prone and side-lying positions



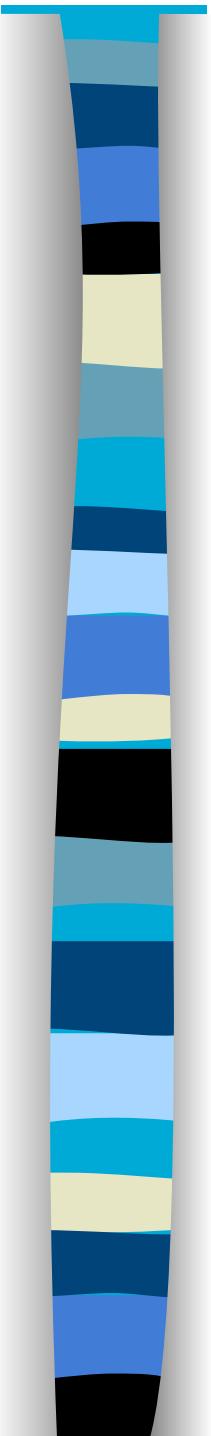


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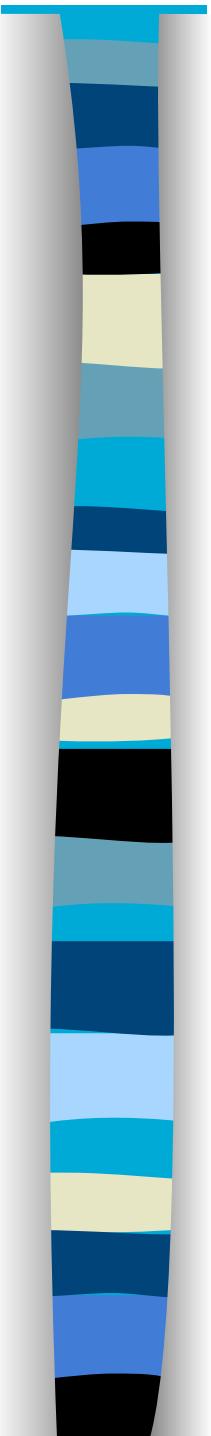


# Delivery

If a client received a C-section within the previous eight weeks, massage:

- A. Is contraindicated
- B. Is locally contraindicated; avoid the back, abdominal area, and gluteal muscles
- C. Is indicated for all appropriate areas of the body
- D. Requires a physician's release

Q



# Delivery

If a client received a C-section within the previous eight weeks, massage:

- A. Is contraindicated
- B. Is locally contraindicated; avoid the back, abdominal area, and gluteal muscles
- C. Is indicated for all appropriate areas of the body
- D. Requires a physician's release**

A

# Delivery

**Relaxin** A hormone produced during pregnancy that facilitates the birth process by causing a softening of the cervix and the pubic symphysis.

- Its presence causes the production of collagen to decrease and promotes collagen breakdown.
- It also plays a role in the timing of delivery by inhibiting contractions of the uterus until labor.

# Definition

# Delivery

**Epidural** A general term used to describe the injection of drugs into the epidural space (the outermost part of the spinal canal) that results in a loss of sensation that eliminates the pain of childbirth.

## Vaginal birth

Birth of a fetus through the vagina.

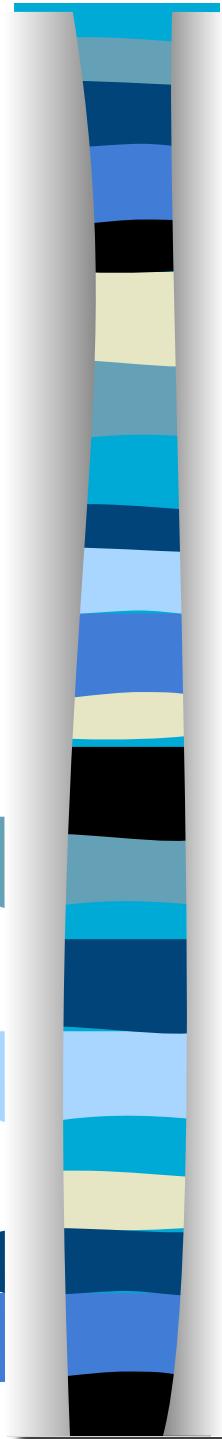
## Cesarean delivery (C-section)

Surgery to deliver a baby through the mother's abdomen when vaginal birth is considered less safe than a cesarean birth.

# Definition



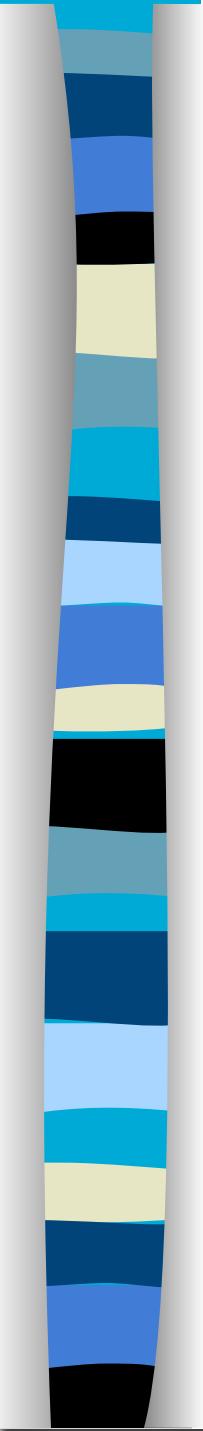




# ABMP Exam Coach

Special Populations:  
Clients who are Pregnant

Benefits of Massage

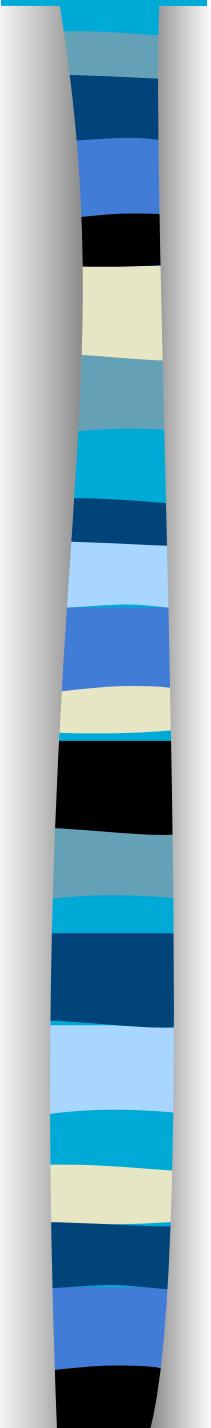


# Benefits of Massage

Abdominal massage for clients who are pregnant:

- A. Is indicated so long as strokes engage the muscles
- B. Is indicated so long as strokes are light and nurturing
- C. Is contraindicated
- D. Is contraindicated if any lower leg edema is present

Q

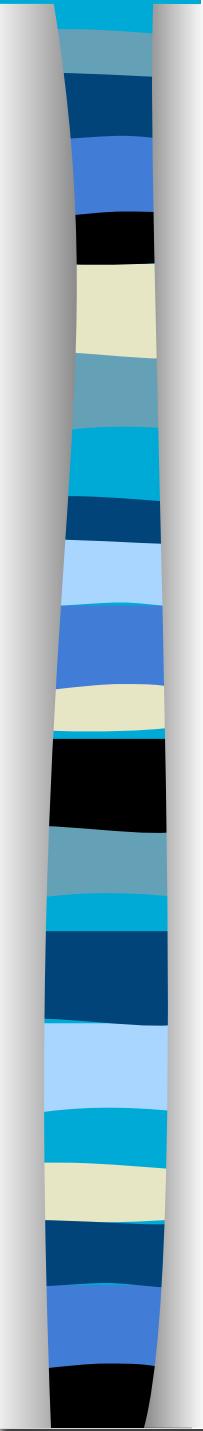


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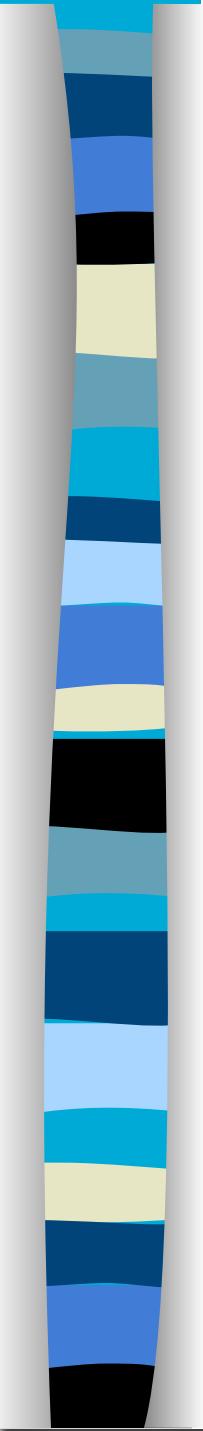


# Benefits of Massage

If a pregnant client arrives at your clinic and complains of shoulder tension and neck pain, massage:

- A. Is contraindicated
- B. Requires a physician's release
- C. Is indicated
- D. Of the neck is a local contraindication

Q

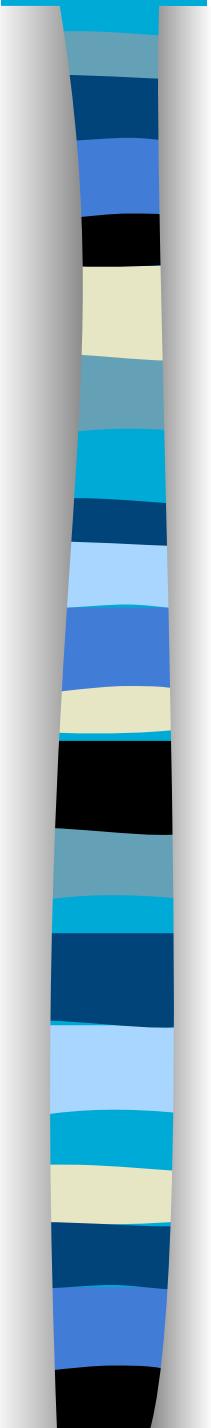


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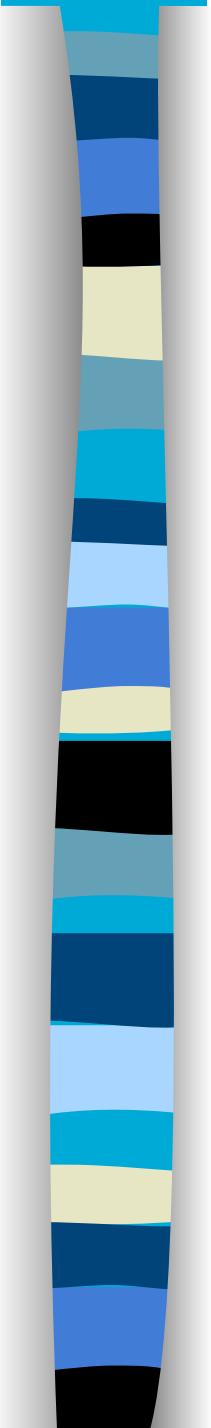


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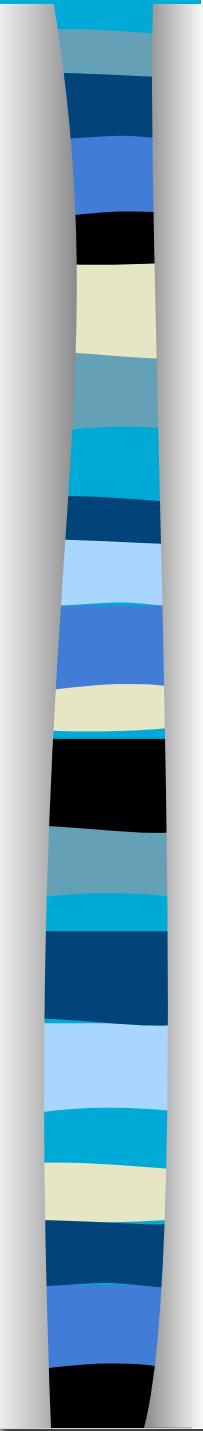


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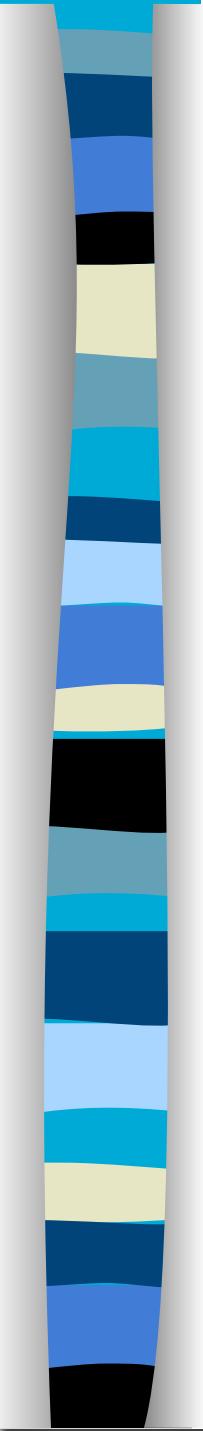


# Benefits of Massage

If a pregnant client arrives at your clinic and complains of back pain, massage:

- A. Is indicated
- B. Is contraindicated
- C. Requires a physician's release
- D. Of the back is a local contraindication

Q

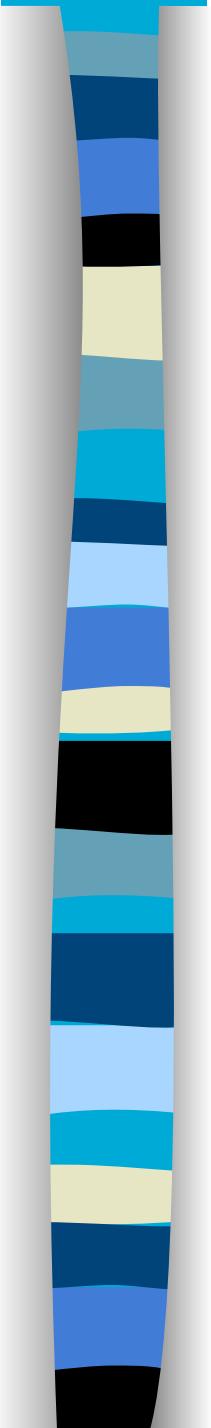


# Benefits of Massage

If a pregnant client arrives at your clinic and complains of back pain, massage:

- A. Is indicated**
- B. Is contraindicated
- C. Requires a physician's release
- D. Of the back is a local contraindication

A



# Benefits of Massage

**Benefits of massage for pregnant clients include:**

- Decreased anxiety
- Improved blood and lymph circulation
- Reduced depression
- Decreased fatigue
- Reduced headache pain
- Improved immunity
- Improved sleep
- Reduced joint pain and stiffness
- Reduced muscle pain and soreness
- Improved skin conditions
- Reduced stress

# Definition



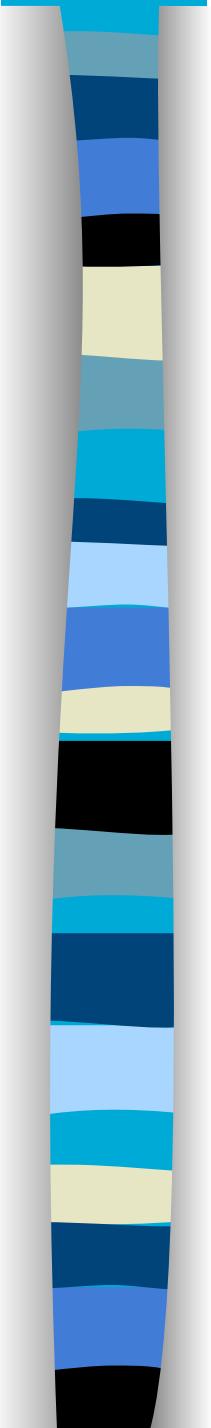




# ABMP Exam Coach

Special Populations:  
Clients who are Pregnant

High-Risk Pregnancy

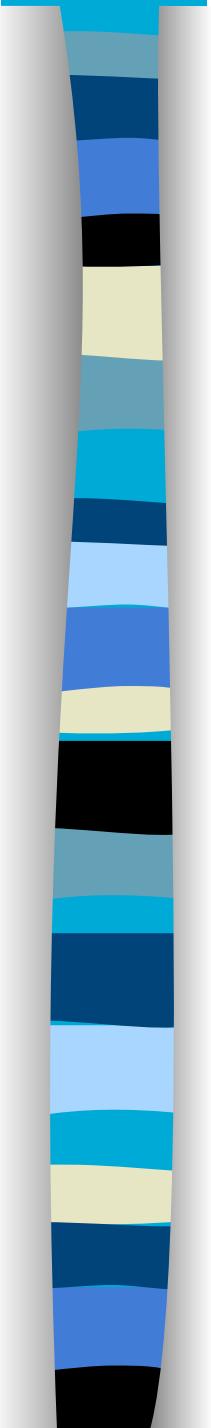


# High-Risk Pregnancy

Pre-existing health concerns such as high blood pressure, kidney disorders, or autoimmune disorders:

- A. Are factors in HNR pregnancy
- B. Usually don't influence a pregnancy
- C. Indicate massage as condition management for pregnancy
- D. Are factors in high-risk pregnancy

Q

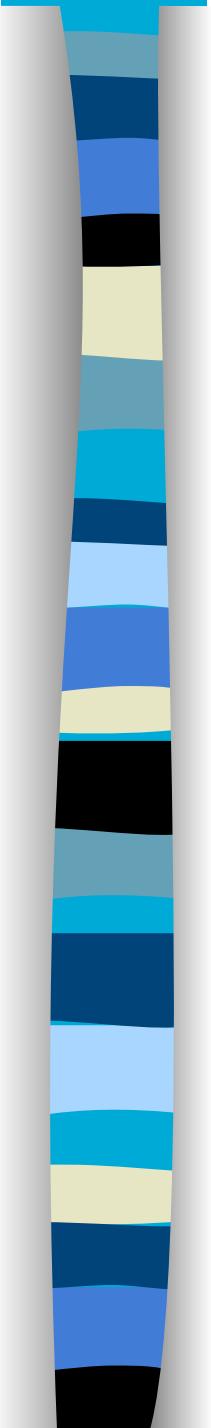


# High-Risk Pregnancy

Pre-existing health concerns such as high blood pressure, kidney disorders, or autoimmune disorders:

- A. Are factors in HNR pregnancy
  - This is not a thing in this context.
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- D. Are factors in high-risk pregnancy**

A

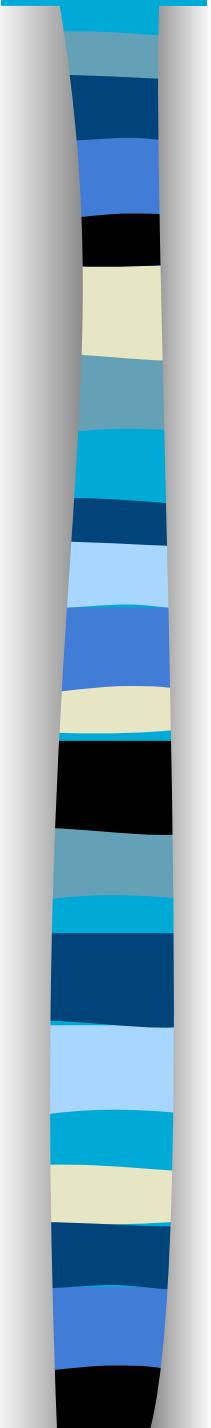


# High-Risk Pregnancy

Factors that lead to high-risk pregnancy include:

- A. When the pregnant woman had previous pregnancies that proceeded normally
- B. When the pregnant woman is overweight
- C. When only one fetus is involved
- D. When the pregnant woman is in the prime of childbearing years

Q

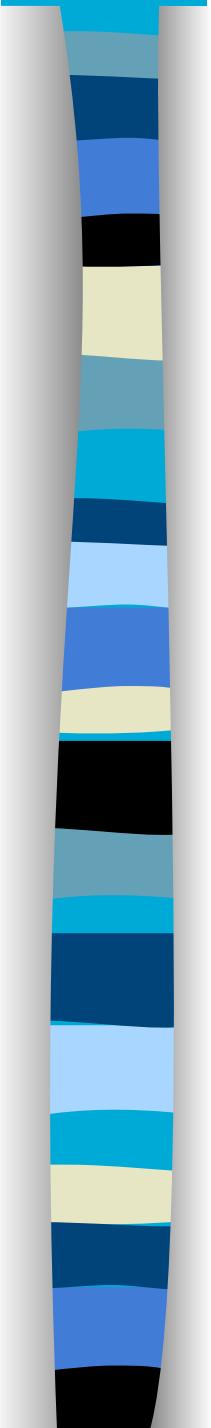


# High-Risk Pregnancy

Factors that lead to high-risk pregnancy include:

- A. When the pregnant woman had previous pregnancies that proceeded normally
- B. When the pregnant woman is **overweight**
  - Or **underweight**.
- C. When only one fetus is involved
- D. When the pregnant woman is in the prime of childbearing years

A

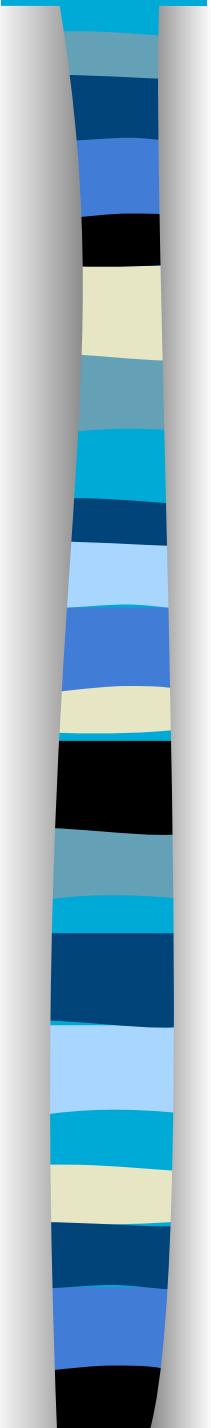


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- D. When the pregnant woman has a history of problems with other pregnancies

Q

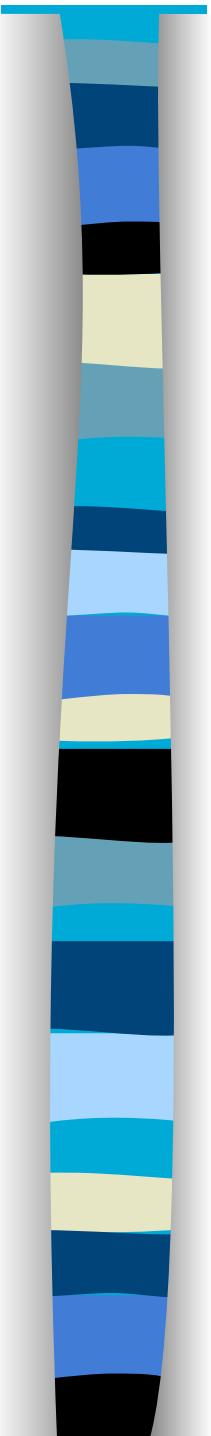


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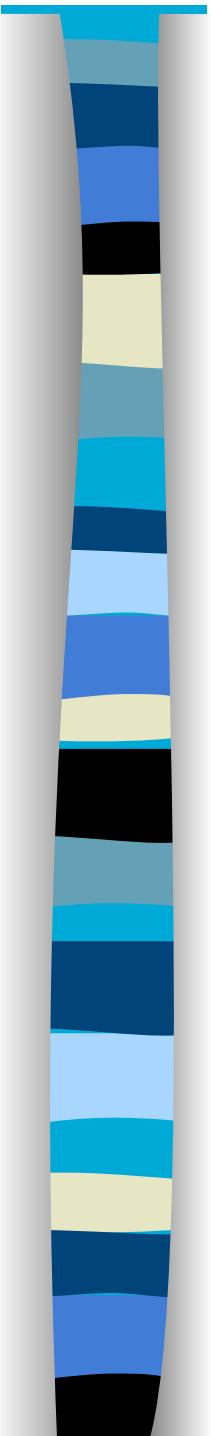


# High-Risk Pregnancy

When the mother or developing fetus is at a higher-than-normal risk for complications, it is called:

- A. A red-flag pregnancy
- B. A HNR pregnancy
- C. A complicated pregnancy
- D. A high-risk pregnancy

Q



# High-Risk Pregnancy

When the mother or developing fetus is at a higher-than-normal risk for complications, it is called:

- A. A red-flag pregnancy
  - Nope.
- B. A HNR pregnancy
  - Nope.
- C. A complicated pregnancy
  - Maybe so, but that's not what it's called.
- D. A **high-risk pregnancy**

A

# High-Risk Pregnancy

**High-risk pregnancy** A pregnancy that puts the mother or the developing fetus at higher-than-normal risk for complications. Factors that lead to high-risk pregnancy include:

- Old or young maternal age
- A mother that is overweight or underweight
- A history of problems with other pregnancies
- Multiple fetuses (e.g., twins)
- Pre-existing health conditions (HIV / AIDS, heart disease, hypertension, kidney disorders, autoimmune disorders, sexually transmitted diseases, diabetes, or cancer)
- Some pregnancies become high risk with the development of preeclampsia, eclampsia, gestational diabetes, or as result of tests that indicate the fetus is abnormal.

## Definition



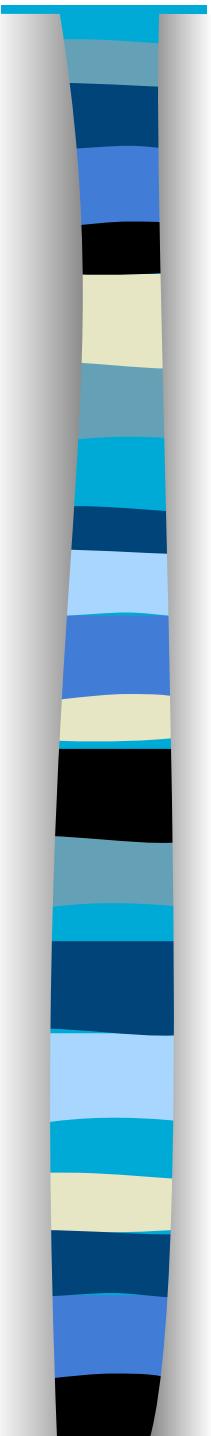




# ABMP Exam Coach

Special Populations:  
Clients who are Pregnant

Cautions & Contraindications

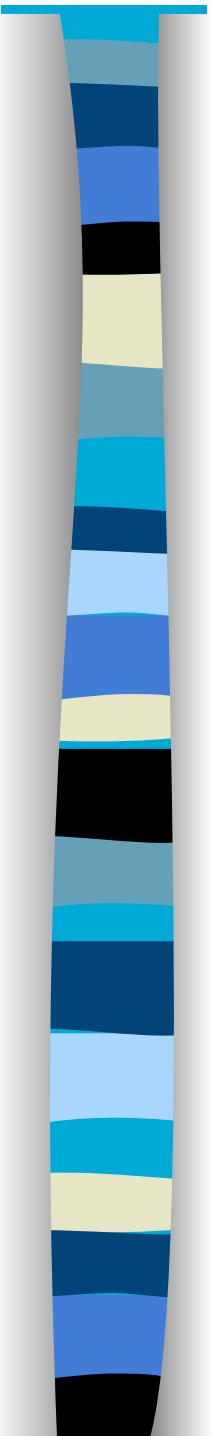


# Cautions & Contraindications

Aromatherapy for clients who are pregnant:

- A. Is contraindicated during the first two trimesters
- B. Is avoided if the practitioner does not have specialized training in aromatherapy
- C. Is indicated so long as appropriate oils like basil, clary sage, and thyme are used
- D. Is always contraindicated

Q

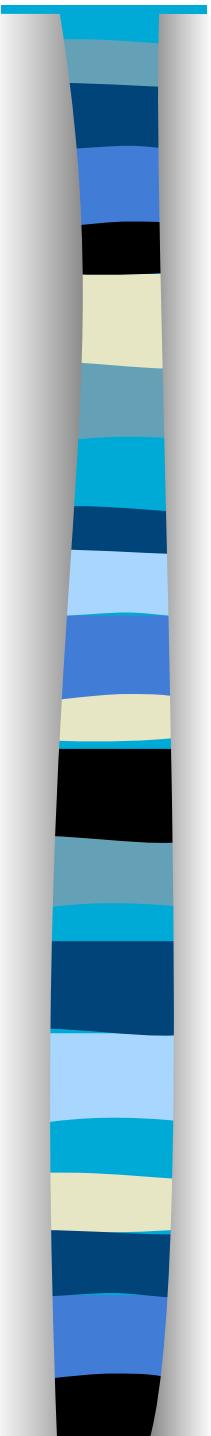


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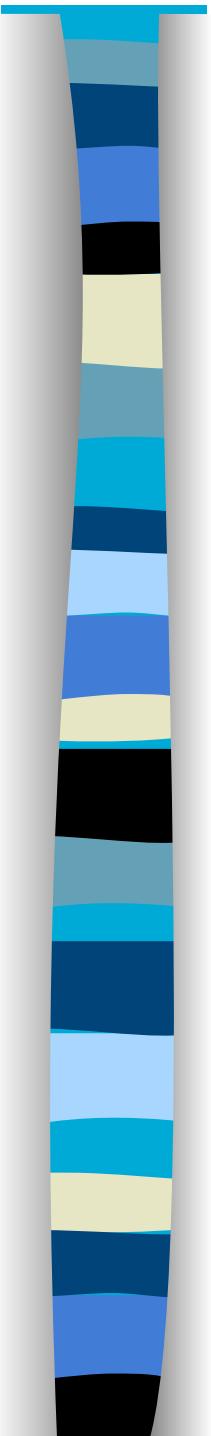


# Cautions & Contraindications

If a pregnant client arrives at your clinic and mentions that the baby hasn't kicked or moved much since yesterday, massage:

- A. Requires a physician's release
- B. Is contraindicated**
- C. Is indicated
- D. Of the abdominal area is a local contraindication

Q

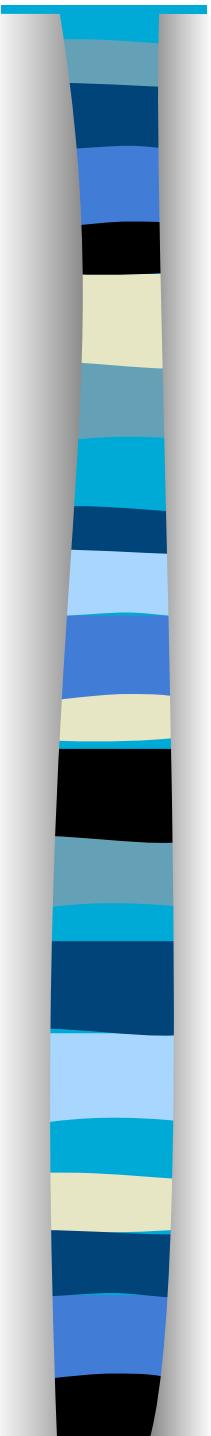


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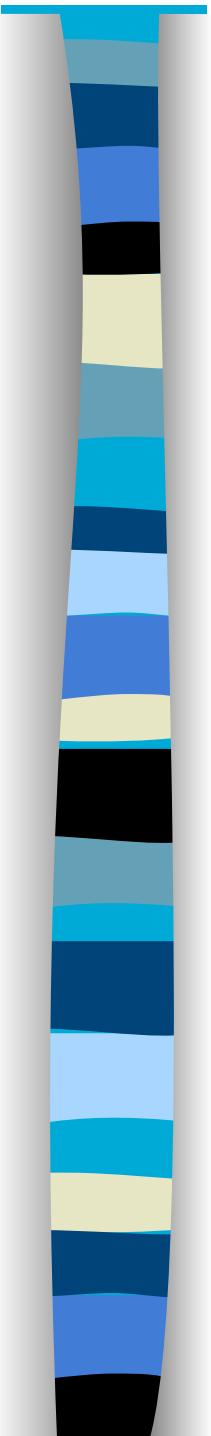


# Cautions & Contraindications

If a pregnant client arrives at your clinic and complains of abdominal cramps, massage:

- A. In the abdominal area is a local contraindication
- B. Requires a physician's release
- C. Is indicated
- D. Is contraindicated

Q

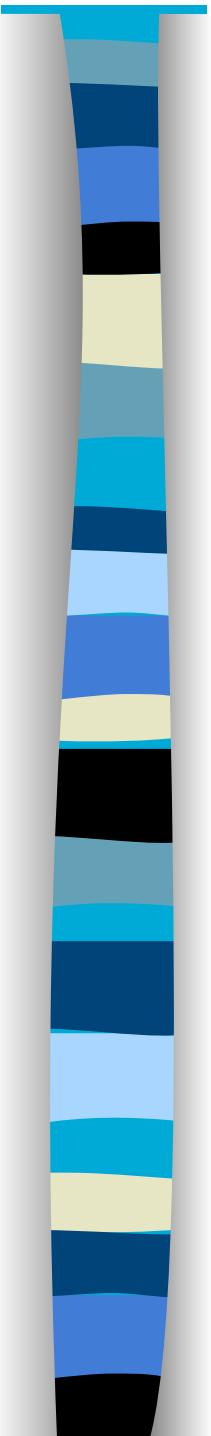


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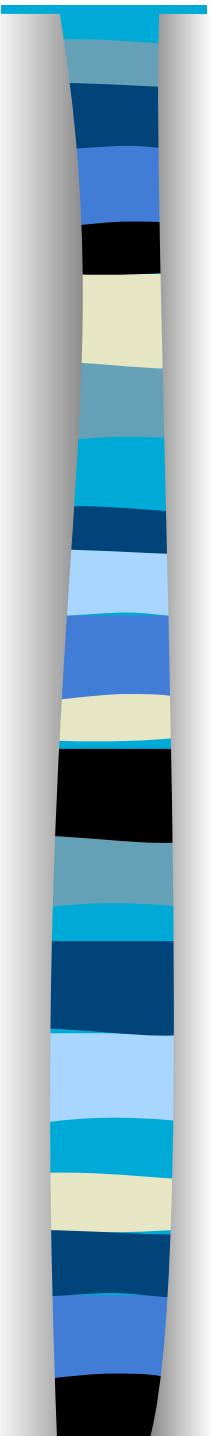


# Cautions & Contraindications

If a pregnant client arrives at your clinic and complains of diarrhea and fatigue, massage:

- A. Requires a physician's release
- B. Is indicated
- C. Of the gluteal muscles and abdominal muscles is a local contraindication
- D. Is contraindicated

Q

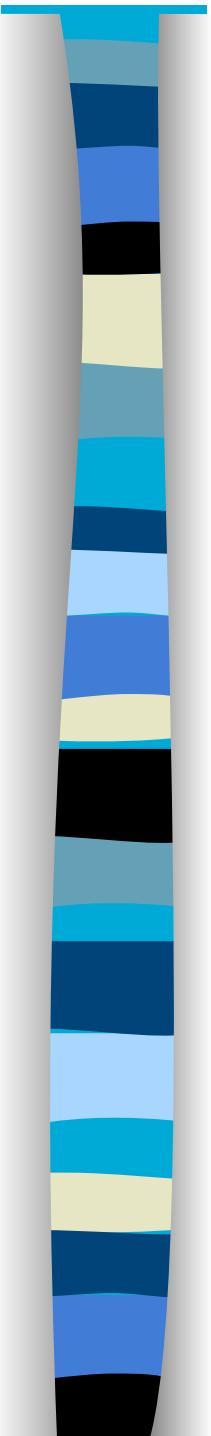


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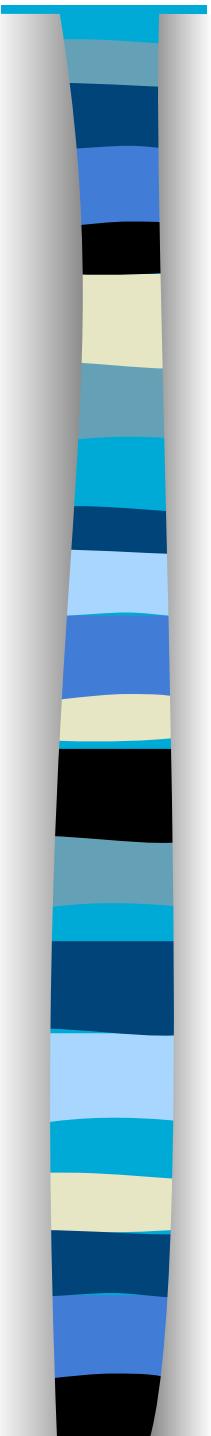


# Cautions & Contraindications

If a pregnant client arrives at your clinic and complains of back pain and light vaginal bleeding, massage:

- A. Is contraindicated
- B. Of the back is a local contraindication
- C. Is indicated
- D. Requires a physician's release

Q

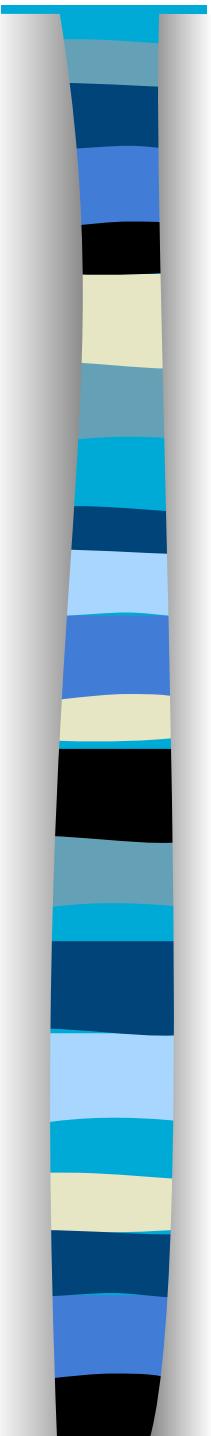


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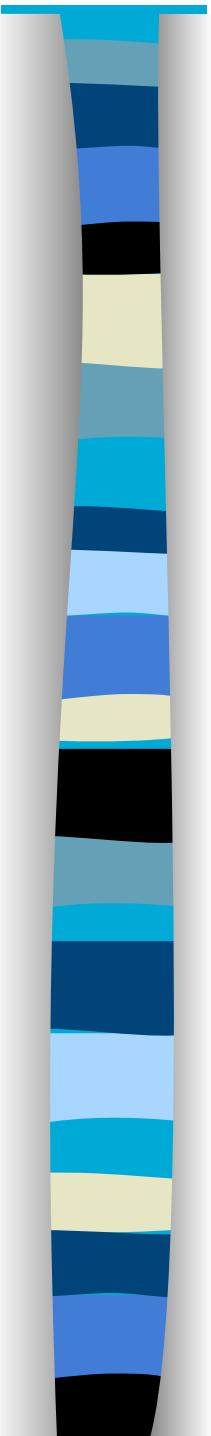
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- B. Of the back is a local contraindication
- C. Is indicated
- D. Requires a physician's release

A



**Cautions for pregnancy massage** Every woman's experience of pregnancy is unique.

- Because complications related to pregnancy can occur for a variety of reasons, it is important to conduct a thorough health history intake to rule out contraindications.
- Obtain a physician's release if you have any doubts about the appropriateness of massage for the client.
- Gentle abdominal massage is acceptable, but moderate to deep work is contraindicated.
- Use caution when massaging the medial thigh because the iliac, great saphenous, and femoral veins are more prone to develop blood clots during pregnancy.
- Techniques from myofascial approaches are avoided during pregnancy, and range of motion techniques are only applied gently and slowly because of the presence of relaxin in the mother's body.
- Avoid areas with varicose veins and watch for signs and symptoms that contraindicate massage.



# Cautions & Contraindications

## **Signs and symptoms that contraindicate massage for pregnant women**

Massage contraindications for pregnant women include:

- Any condition that normally contraindicates massage
- Abdominal cramps
- Abdominal pain
- Back pain with vaginal bleeding
- Decreased fetal movement over a 24-hour period
- Diarrhea
- High-risk pregnancy
- Morning sickness that includes nausea and vomiting
- Severe swelling or pitting edema in the extremities
- Severe pain anywhere in the body
- Uterine contractions
- Vaginal bleeding

# Definition



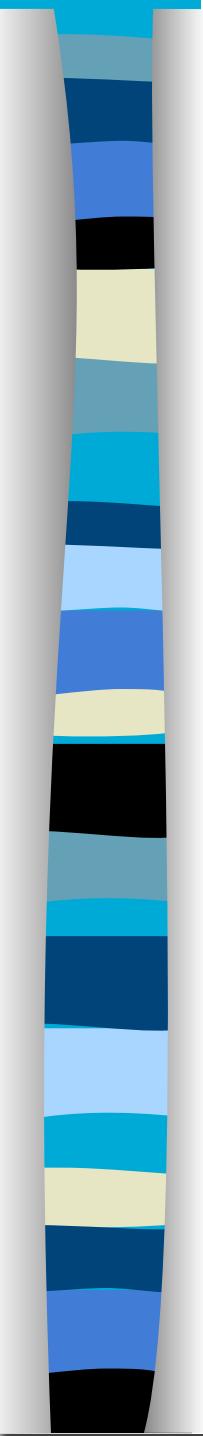




# ABMP Exam Coach

Special Populations:  
Clients who are Pregnant

Pregnancy-Associated Conditions

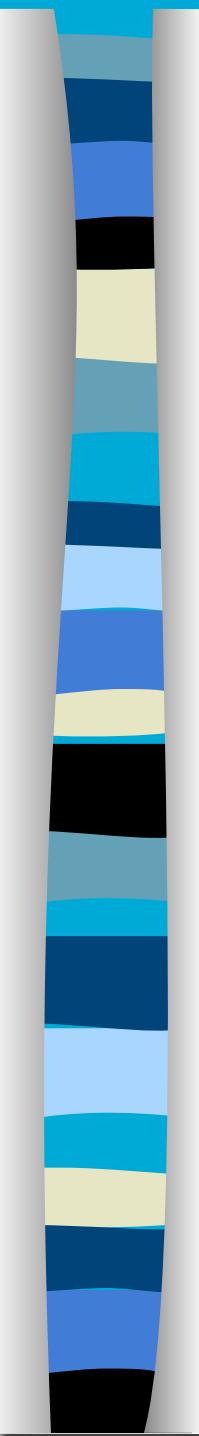


# Pregnancy-Associated Conditions

Caution is used when massaging the medial thigh when clients are pregnant because:

- A. The iliac, great saphenous, and femoral veins accessible in the medial thigh are more prone to bruising during pregnancy
- B. The iliac, great saphenous, and femoral veins accessible in the medial thigh are more prone to develop blood clots during pregnancy
- C. The brachial, radial, and cephalic veins accessible in the medial thigh are more prone to bruising during pregnancy
- D. The brachial, radial, and cephalic veins accessible in the medial thigh are more prone to develop blood clots during pregnancy



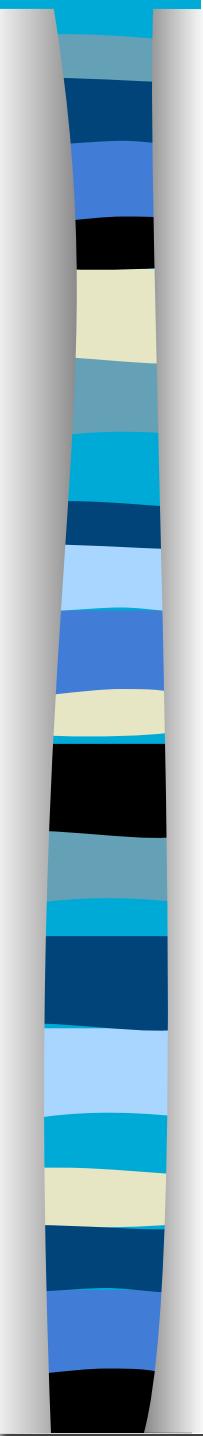


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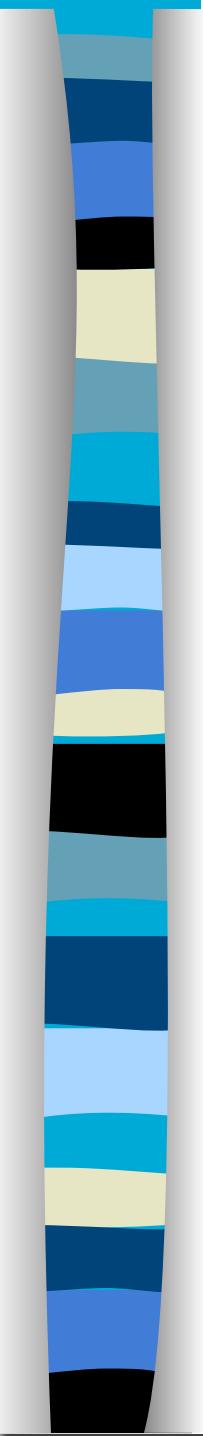


# Pregnancy-Associated Conditions

As the uterus grows during pregnancy, it places pressure on the inferior vena cava, leading to:

- A. Difficulty breathing
- B. Varicose veins
- C. Low-back pain
- D. Axillary artery blood clots

Q



# Pregnancy-Associated Conditions

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- A. Difficulty breathing
- B. Varicose veins**
- C. Low-back pain
- D. Axillary artery blood clots

A

# Pregnancy-Associated Conditions

**Blood clots** A substance (e.g., air bubble, globules of fat, bone chips, chemicals from illegal drugs, amniotic fluid, etc.) combined with blood, or blood that has been converted from a liquid to a solid state.

- A thrombus is a blood clot that is stationary within a vessel. A potentially life-threatening embolus is a blood clot that travels through the bloodstream and then lodges in the blood vessel, blocking the flow of blood.
- When a woman is pregnant, she is more likely to develop blood clots because of pregnancy hormones and because the growing uterus places pressure on the veins in her pelvis.
- The iliac, great saphenous, and femoral veins accessible in the medial thigh are more prone to develop blood clots during pregnancy. For this reason, caution is used when providing massage in this region.

# Pregnancy-Associated Conditions

**Preeclampsia** A disorder that occurs during pregnancy characterized by high blood pressure and proteinuria (the excess of serum proteins in the urine). If left untreated, preeclampsia can develop into eclampsia and be life-threatening.

**Eclampsia** A serious and life-threatening form of pregnancy-related hypertension characterized by:

- Seizure
- Coma
- Hypertension
- Proteinuria (the excess of serum proteins in the urine)
- Edema

## Definition

# Pregnancy-Associated Conditions

**Gestational diabetes** A condition in which women without previously diagnosed diabetes exhibit high blood glucose levels during pregnancy, especially during their third trimester.

- It is caused when insulin receptors do not function properly.

## Definition

# Pregnancy-Associated Conditions

**Varicose veins** A vein that is distended, enlarged, and/or twisted near the surface of the skin, most commonly found in the legs. They are caused by:

- Weakened valves and veins
- Exacerbated by being overweight, pregnant, or having a job where you must stand for long periods of time, thereby increasing the pressure on your leg veins.
- As the uterus grows during pregnancy, it places pressure on the inferior vena cava which, leads to varicose veins.

## Definition



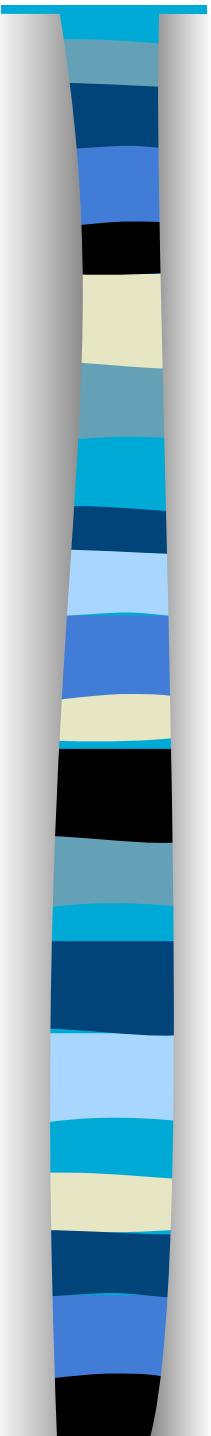




# ABMP Exam Coach

Special Populations:  
Clients who are Athletes

Sports Massage

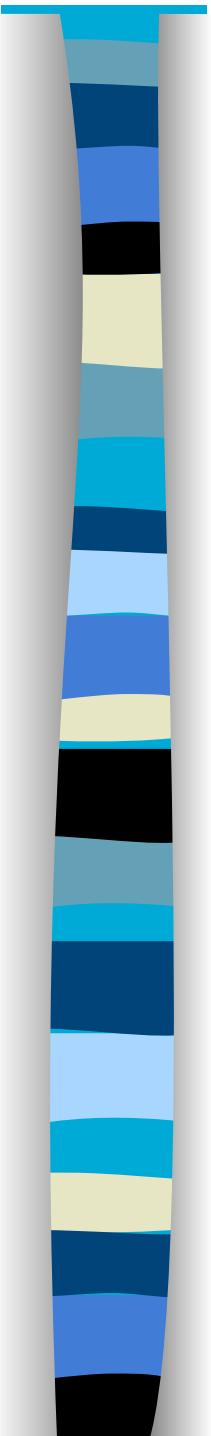


# Sports Massage

Massage provided to athletes or people who are fitness-oriented is often called:

- A. Athlete massage
- B. Amateur massage
- C. Athleteology
- D. Sports massage

Q

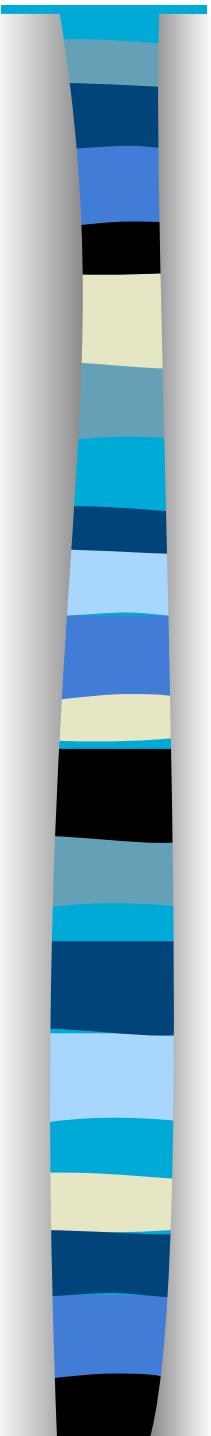


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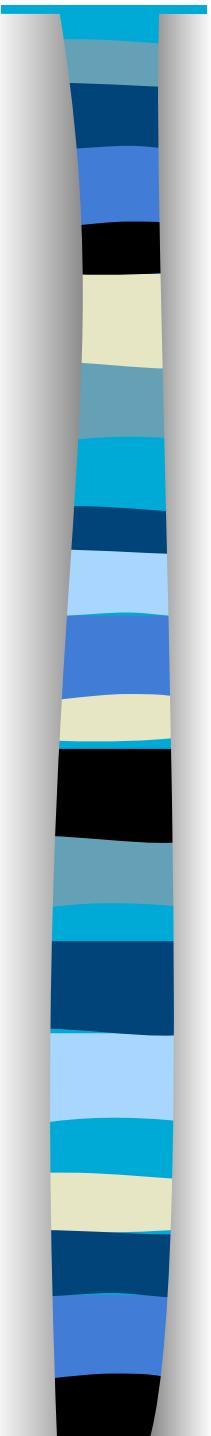


# Sports Massage

Professional athletes are:

- A. People who work with athletes but who don't play sports themselves
- B. People who play sports but also have jobs in sports-related retail careers
- C. People who take part in sports for fitness and fun
- D. People who make their living in sports

Q

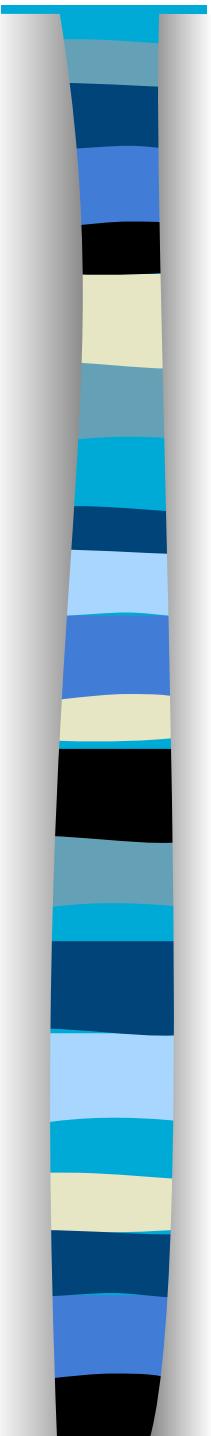


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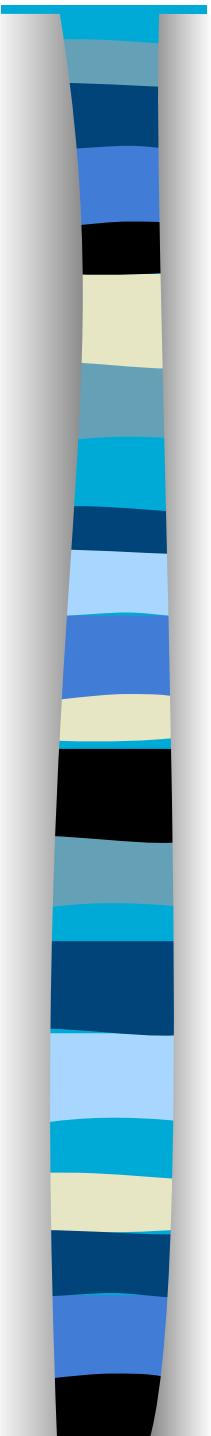


# Sports Massage

Amateur athletes are:

- A. People who take part in sports for fitness, fun, or as part of nonprofessional or collegiate activities
- B. People who are reimbursed for their athletic efforts
- C. People who make their living in sports
- D. People who work with athletes but who don't play sports themselves

Q



# Sports Massage

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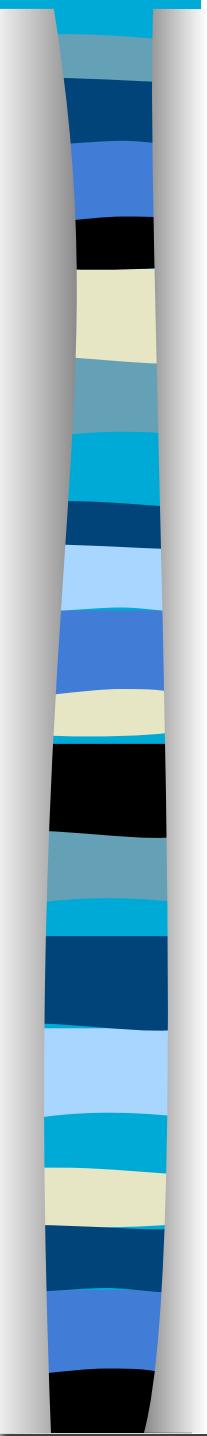




# ABMP Exam Coach

Special Populations:  
Clients who are Athletes

Types of Sports Massage

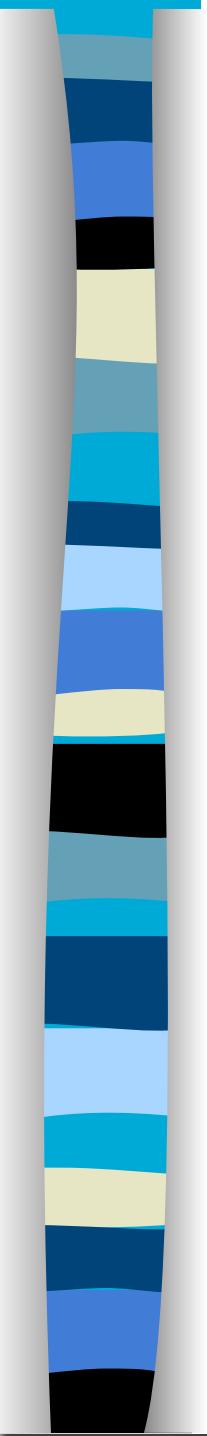


# Types of Sports Massage

A massage used to help the athlete prepare for optimal performance and delivered at a mountain bike competition is called:

- A. Treatment massage
- B. Training massage
- C. Maintenance massage
- D. Event massage

Q

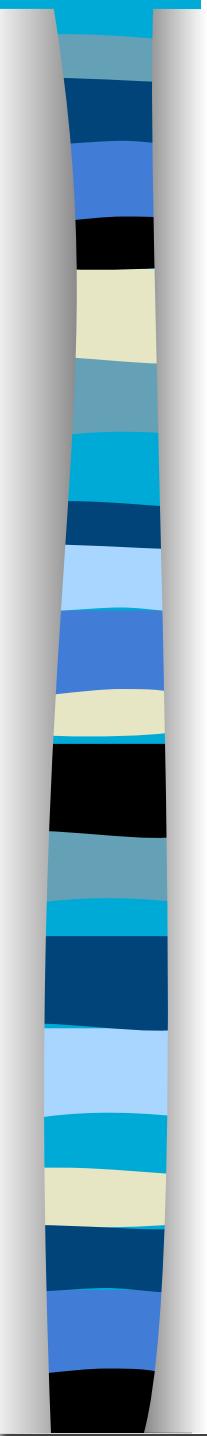


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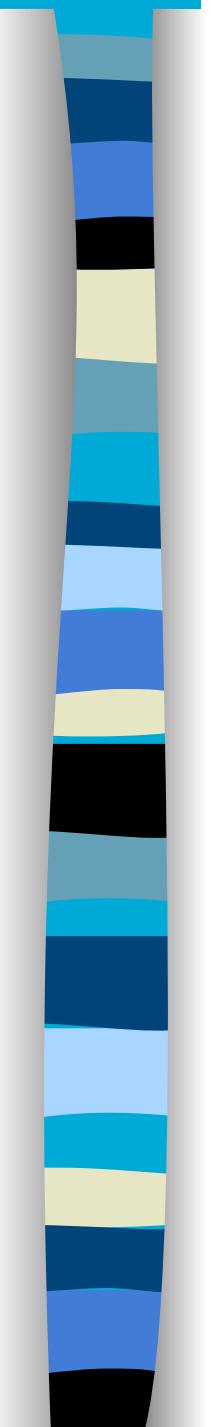


# Types of Sports Massage

A pre-event massage is usually provided to an athlete:

- A. Directly after the athlete has performed in the event
- B. Between 1 day and 2 hours before the start of the event
- C. Once a week for six weeks following an event
- D. 10 minutes before the start of the event

Q

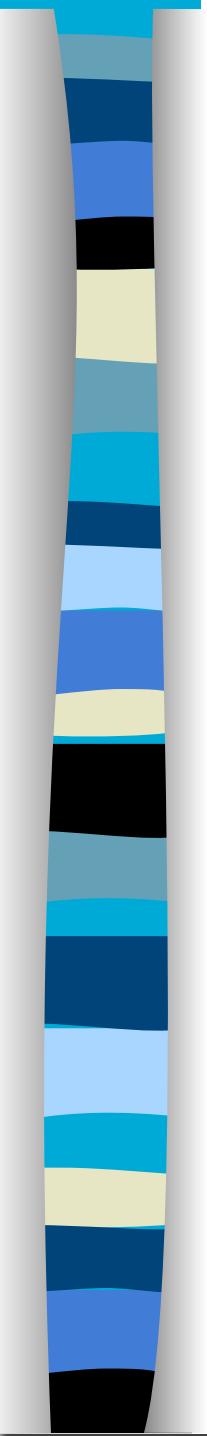


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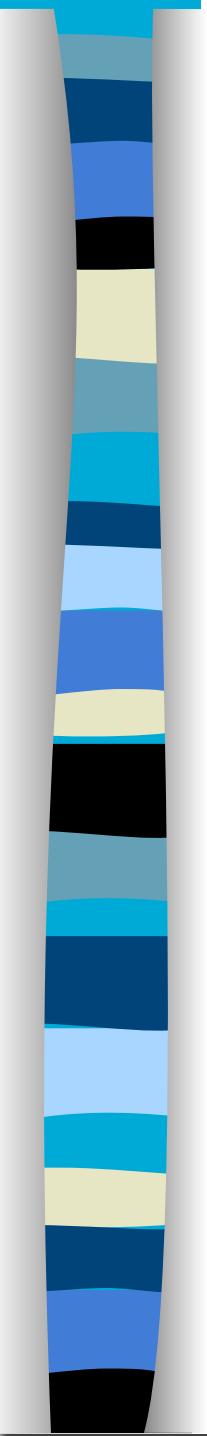


# Types of Sports Massage

A massage provided after a first athletic effort to decrease muscular tension before a second athletic effort is called:

- A. Treatment massage
- B. Post-event massage
- C. Maintenance massage
- D. Intra-event massage

Q

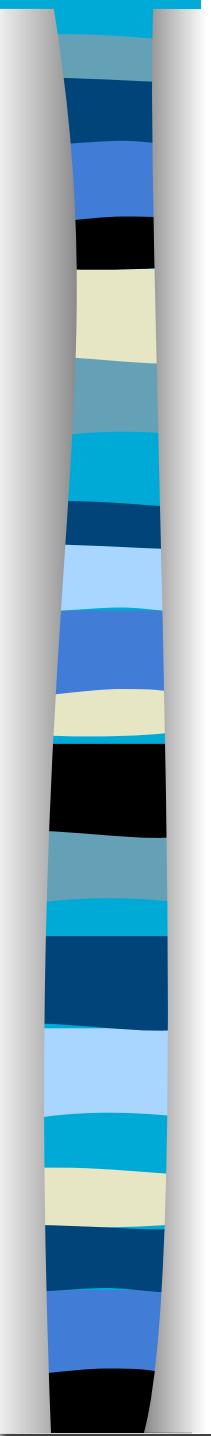


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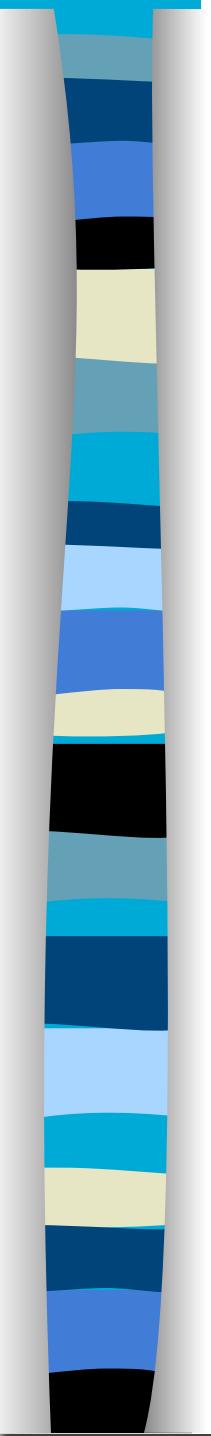


# Types of Sports Massage

When an athlete sustains an injury and massage is part of the rehabilitation process, it is called:

- A. Intra-event massage
- B. Treatment massage
- C. Maintenance massage
- D. Training massage

Q

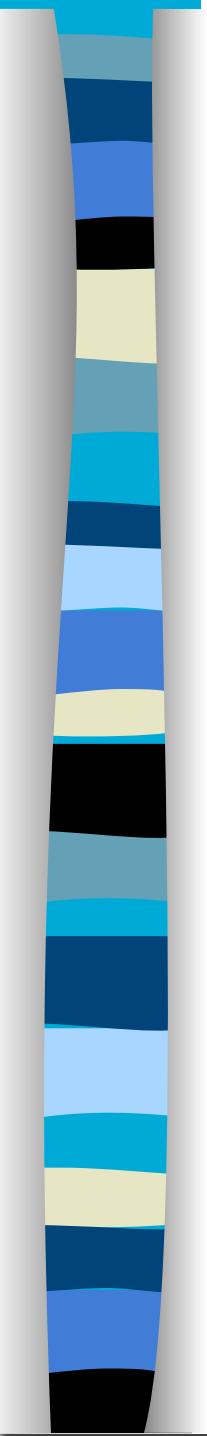


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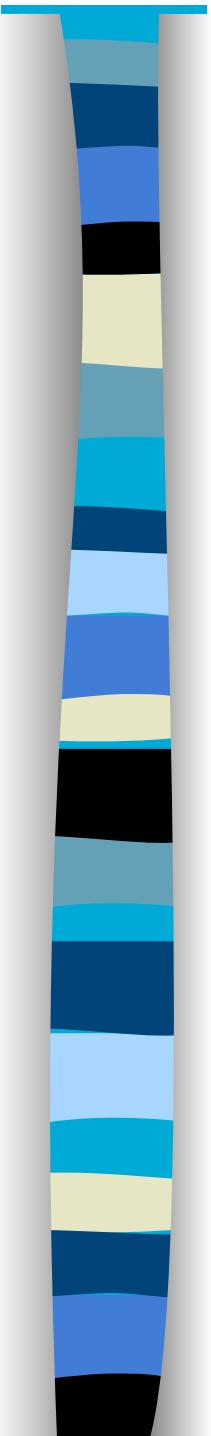


# Types of Sports Massage

Regular massage the athlete receives while training is called:

- A. Intra-event massage
- B. Pre-event massage
- C. Post-event massage
- D. Maintenance massage

Q

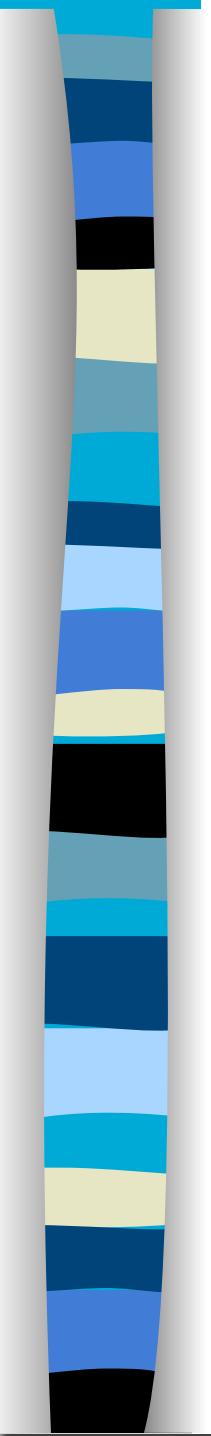


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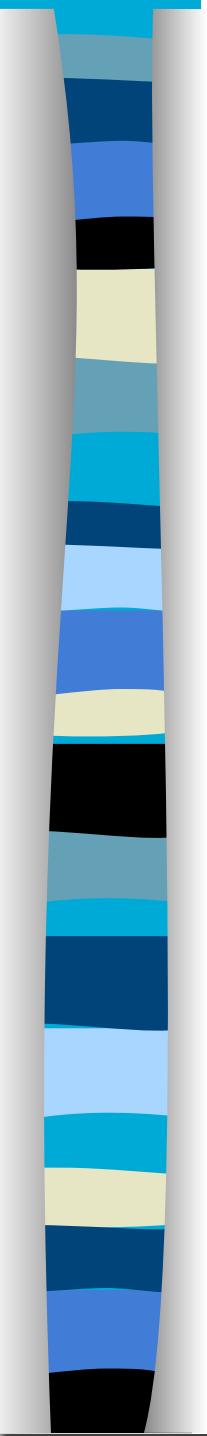


# Types of Sports Massage

This type of massage is often performed on the athlete's less strenuous training days because one of its goals is to aid in the recovery process:

- A. Maintenance massage
- B. Intra-event massage
- C. Treatment massage
- D. Pre-event massage

Q

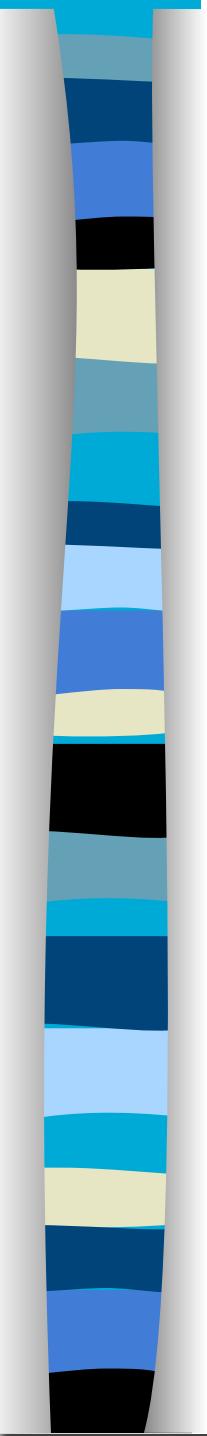


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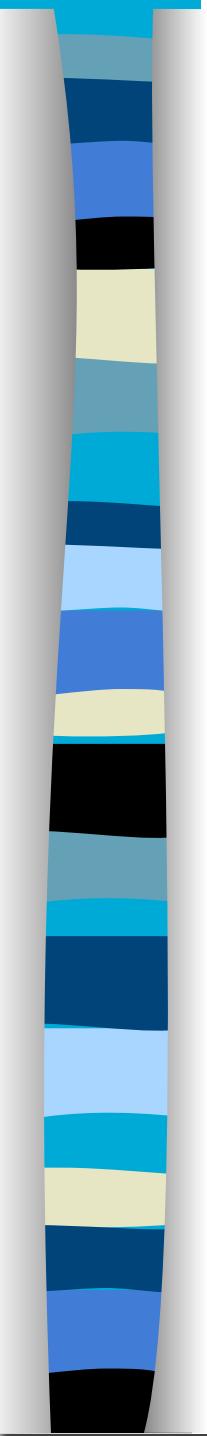


# Types of Sports Massage

Massage delivered at a sporting event where the athletes are not currently your clients is called:

- A. Pre-event massage
- B. Promotional event massage
- C. Intra-event massage
- D. New client treatment massage

Q

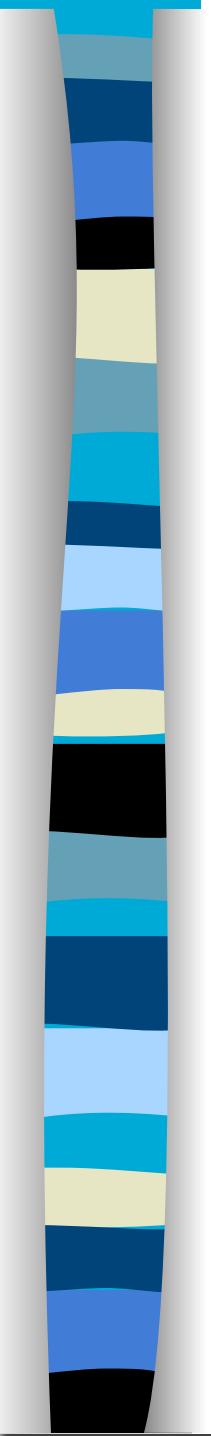


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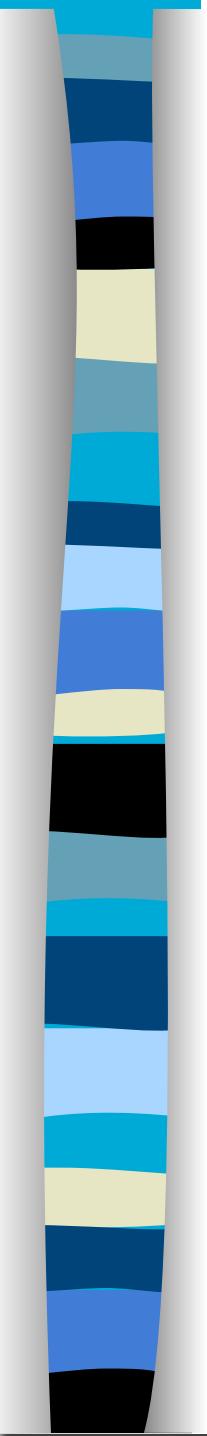


# Types of Sports Massage

A massage provided to an athlete before he or she participates in a sporting event is called:

- A. Pre-event massage
- B. Maintenance massage
- C. Intra-event massage
- D. Treatment massage

Q

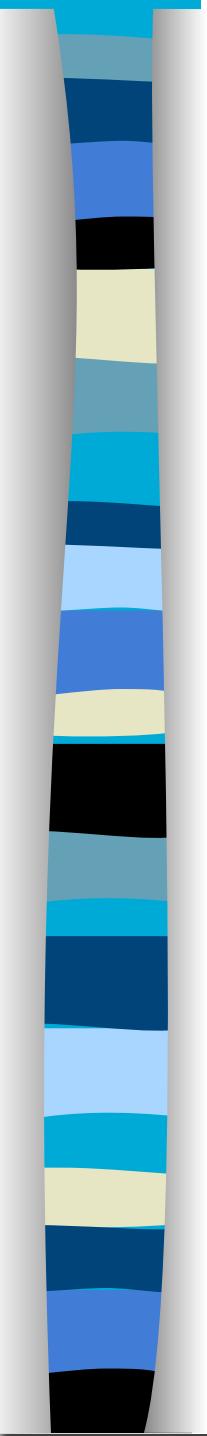


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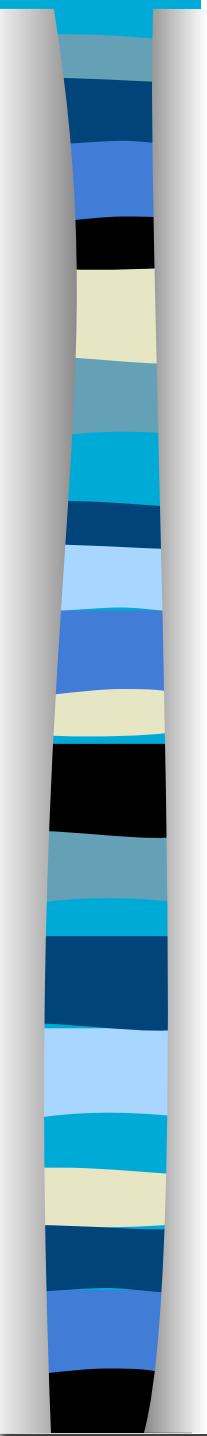


# Types of Sports Massage

Massage performed after all athletic efforts have concluded and usually within 2 hours of the last effort is called:

- A. Post-event massage
- B. Treatment massage
- C. Intra-event massage
- D. Pre-event massage

Q

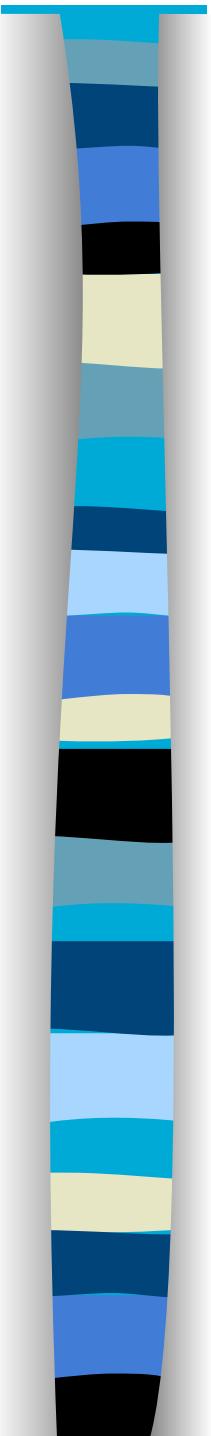


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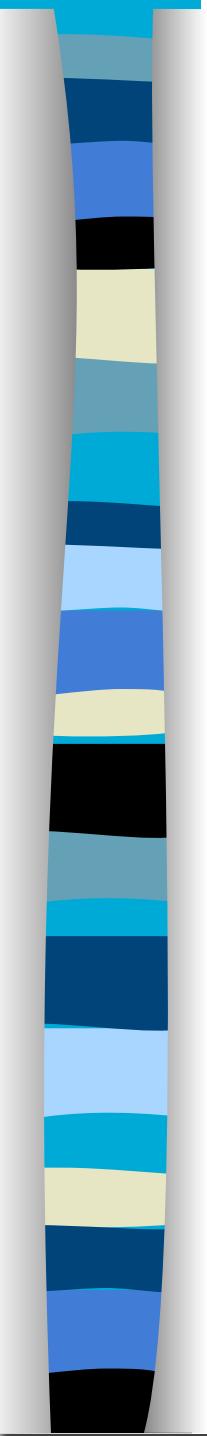


# Types of Sports Massage

Massage provided to a runner at a 10k event is called:

- A. Event massage
- B. Maintenance massage
- C. Training massage
- D. Treatment massage

Q

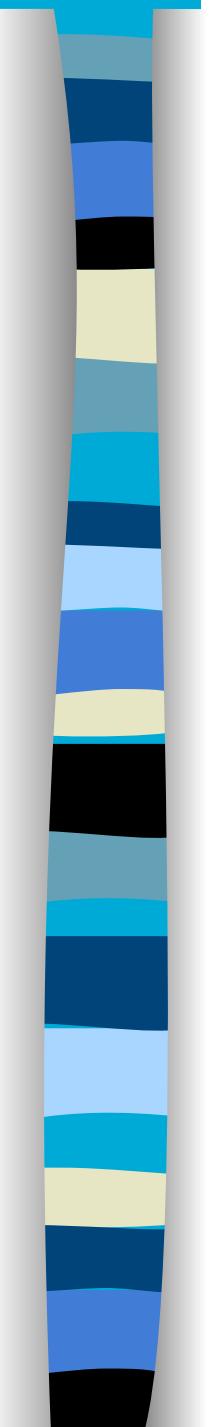


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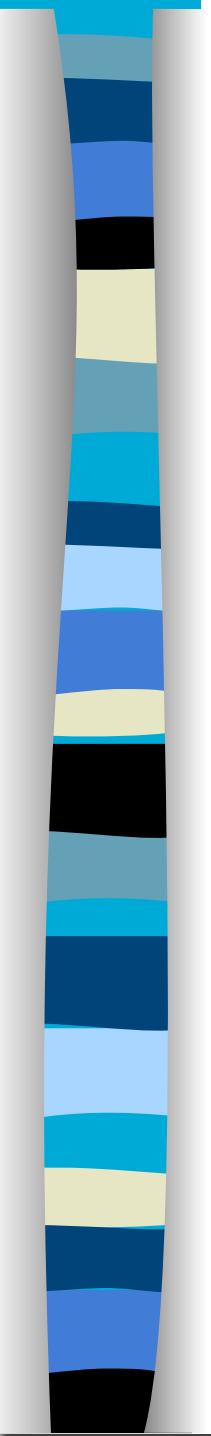


# Types of Sports Massage

Massage provided between heats, innings, at half time, or between different events at a match or meet is called:

- A. Intra-event massage
- B. Treatment massage
- C. Maintenance massage
- D. Pre-event massage

Q



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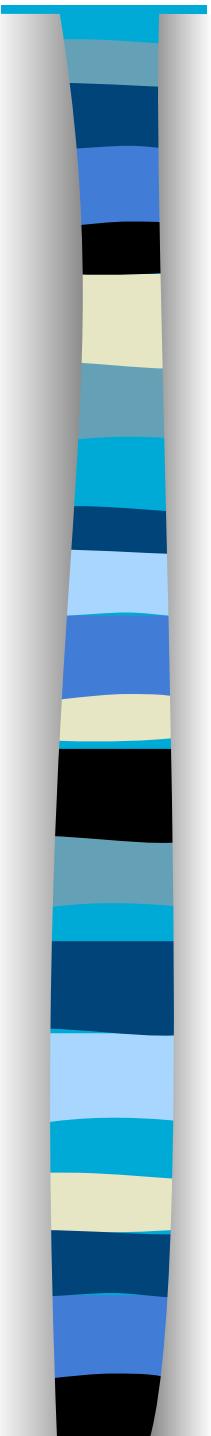




# ABMP Exam Coach

Special Populations:  
Clients who are Athletes

Sports Massage Techniques

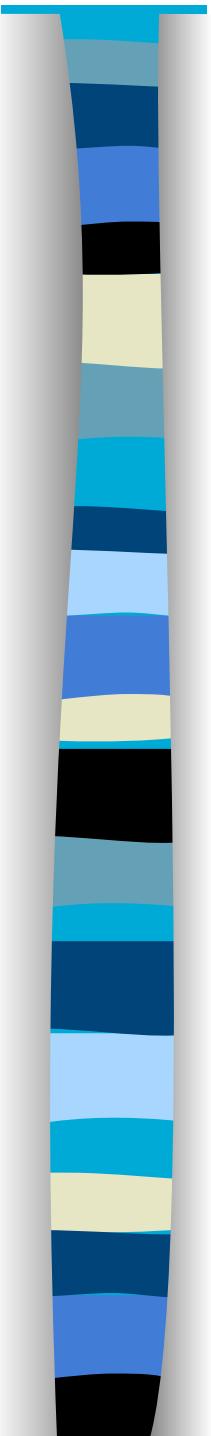


# Sports Massage Techniques

This type of massage is performed at a brisk pace and for a short duration (10–20 minutes):

- A. Post-event massage
- B. Training massage
- C. Maintenance massage
- D. Pre-event massage

Q

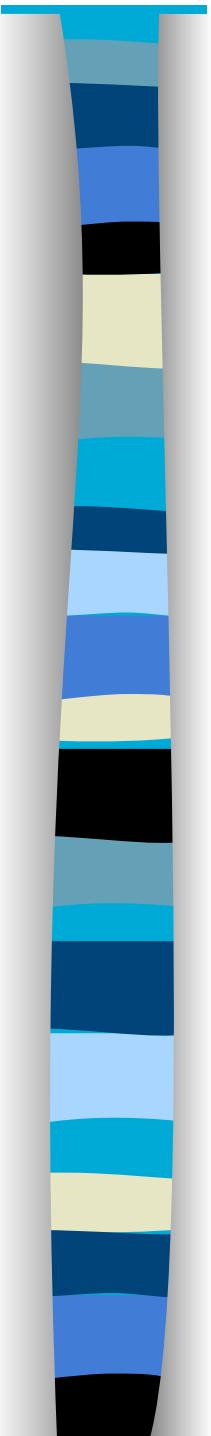


# Sports Massage Techniques

This type of massage is performed at a brisk pace and for a short duration (10–20 minutes):

- A. Post-event massage
- B. Training massage
- C. Maintenance massage
- D. Pre-event massage**

A

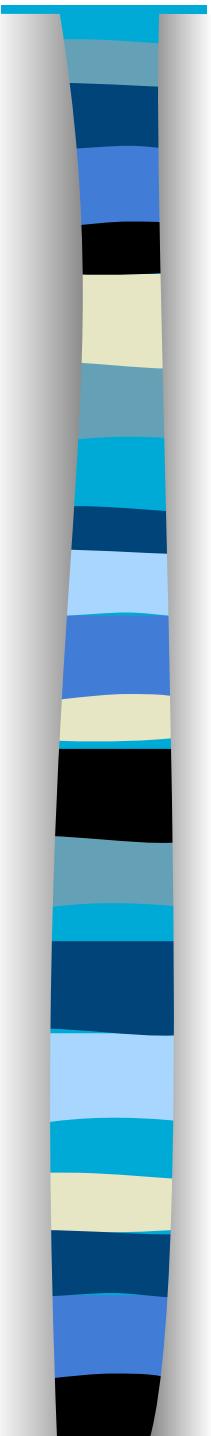


# Sports Massage Techniques

One technique that might be used in post-event massage is:

- A. Soothing, gliding strokes at a moderate pressure
- B. Deep transverse friction
- C. Tapotement
- D. Resisted joint movement

Q

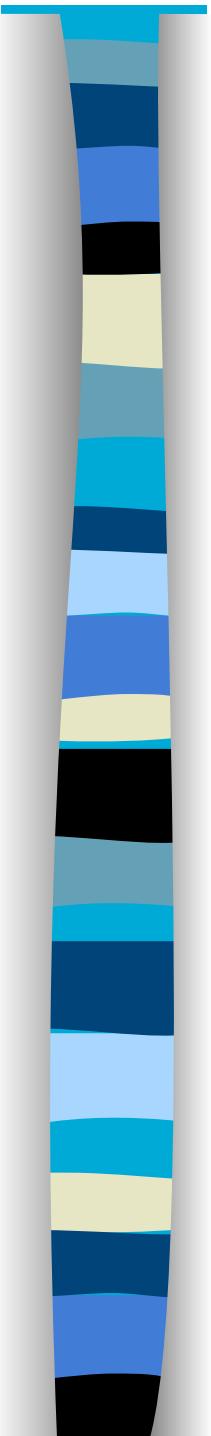


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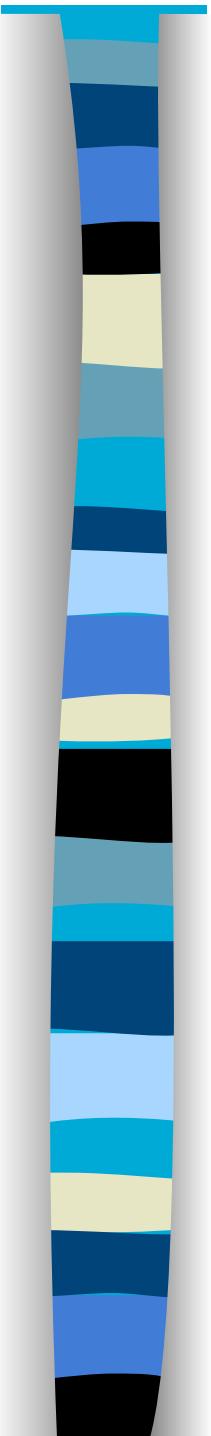


# Sports Massage Techniques

Techniques in intra-event massage are usually the same as:

- A. Post-event massage
- B. Treatment massage
- C. Maintenance massage
- D. Pre-event massage

Q

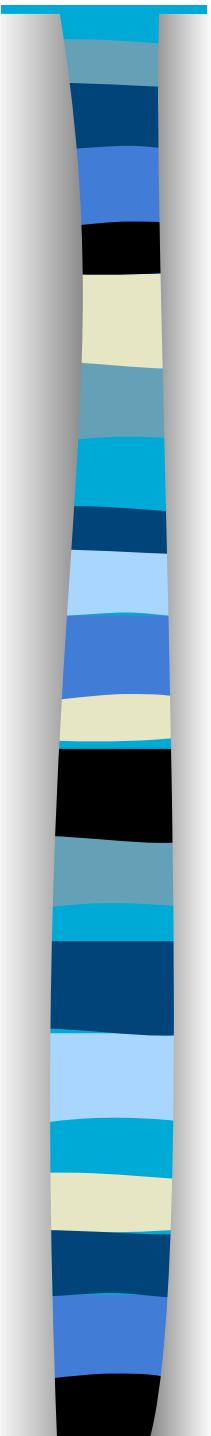


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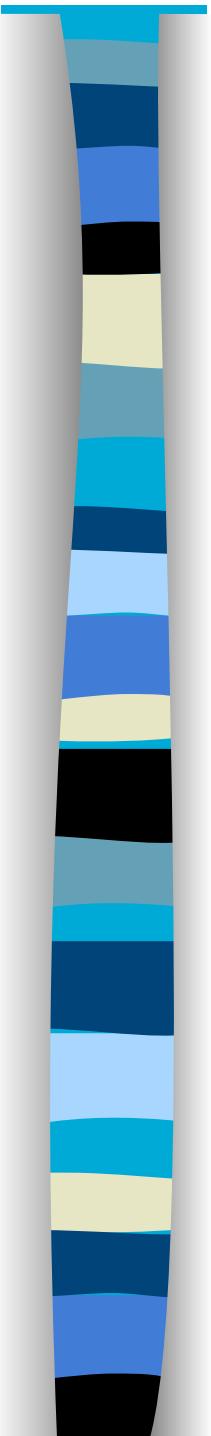


# Sports Massage Techniques

Slow, overly-relaxing techniques that might sedate the athlete and send the body into rest and recovery mode are avoided during:

- A. Pre-event massage
- B. Treatment massage
- C. Training massage
- D. Maintenance massage

Q

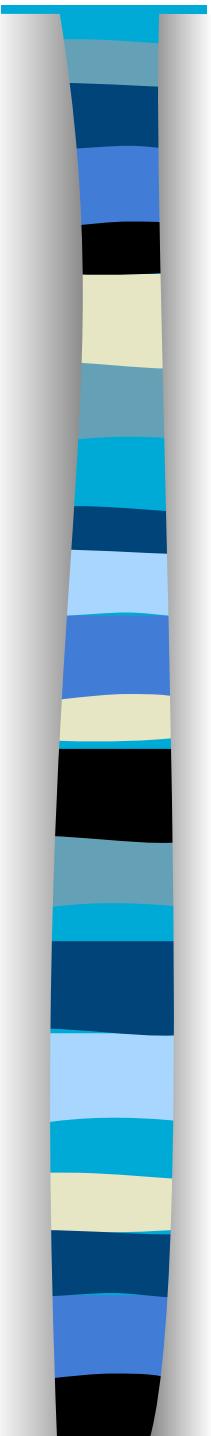


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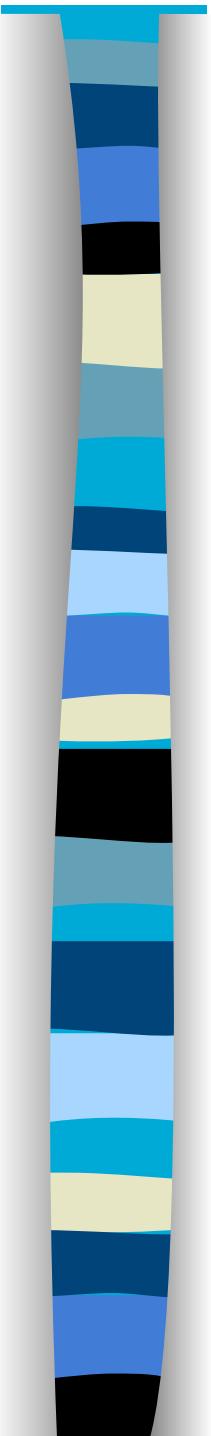


# Sports Massage Techniques

Pre-event massage would include:

- A. Slow effleurage
- B. Tapotement
- C. Aggressive stretching
- D. Proprioceptive techniques

Q



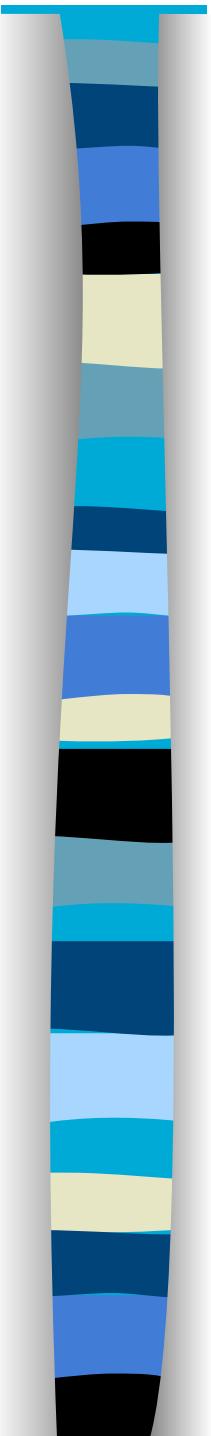
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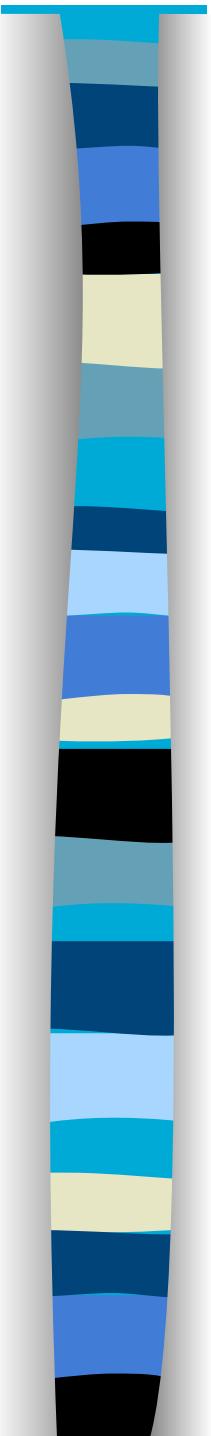


# Sports Massage Techniques

At sporting events, a massage therapist's focus is on:

- A. Small muscle groups that balance out the overexertion of the muscles associated with the particular activity in which the athlete is performing
- B. Keeping the athlete fired up between events so that he or she is constantly ready for action
- C. Keeping an athlete in a state of deep relaxation so that he or she does not get overly restless
- D. Large muscle groups associated with the particular activity in which the athlete is performing



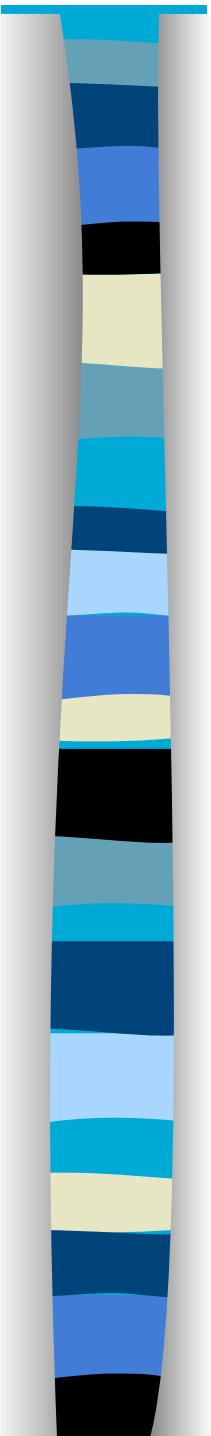


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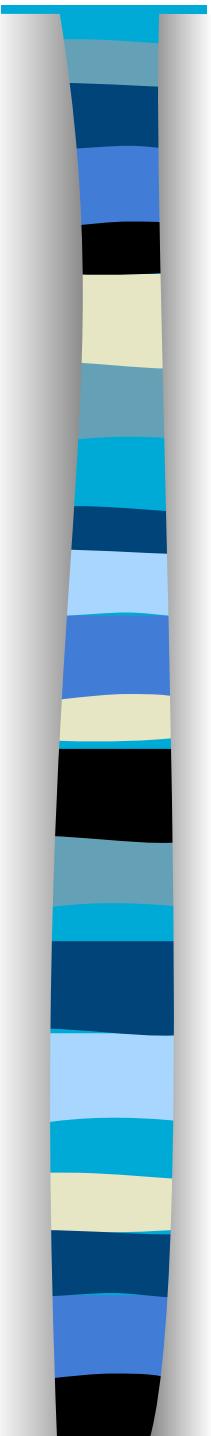


# Sports Massage Techniques

Lubricant is rarely used during:

- A. Training massage
- B. Pre-event massage
- C. Maintenance massage
- D. Post-event massage

Q



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Lubricant is rarely used during:

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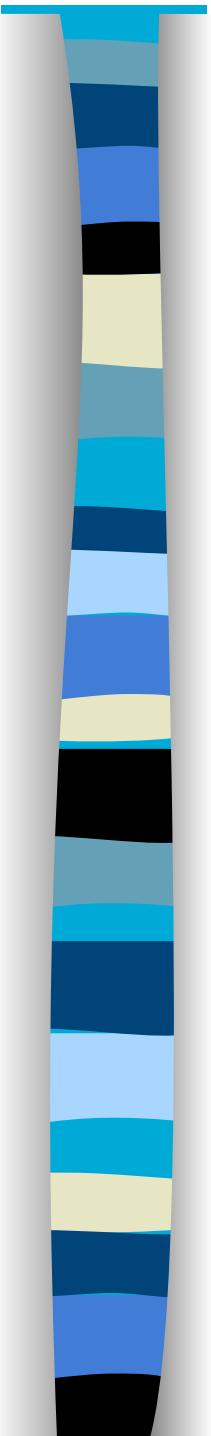




# ABMP Exam Coach

Special Populations:  
Clients who are Athletes

Benefits of Sports Massage

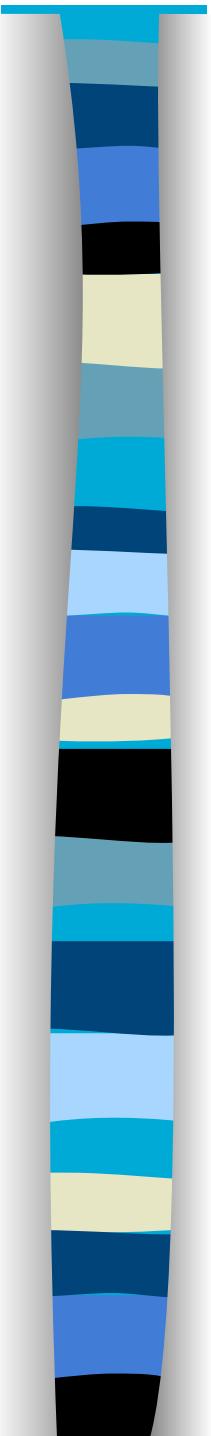


# Benefits of Sports Massage

One benefit of pre-event massage for athletes is:

- A. Improved relaxation and sleepiness before the event
- B. Improved mental attitude and concentration
- C. Improved water consumption between events
- D. Improved appetite after the event

Q

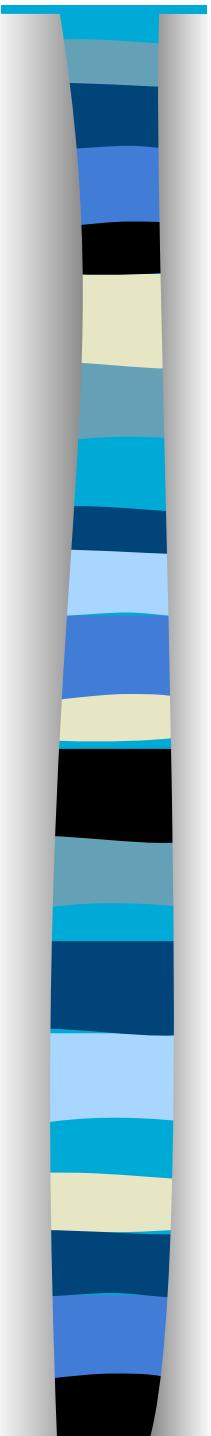


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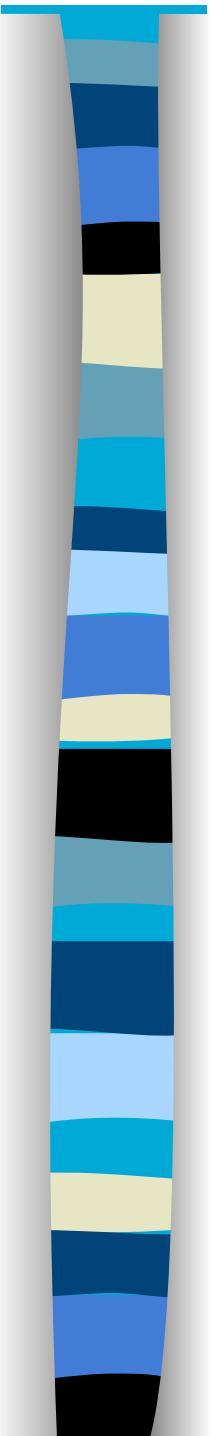


# Benefits of Sports Massage

One goal of post-event massage is to:

- A. Aid muscle recovery
- B. Prepare the athlete mentally and emotionally for a rest day
- C. Prepare the athlete for optimal performance
- D. Aid sympathetic nervous system firing

Q



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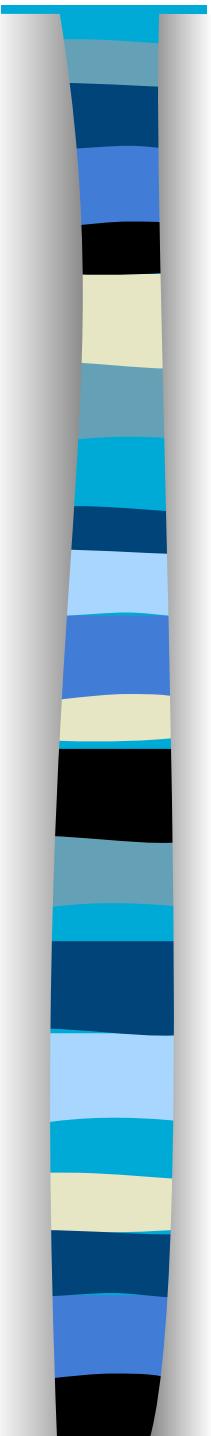




# ABMP Exam Coach

Special Populations:  
Clients who are Athletes

Conditions Affecting Athletes

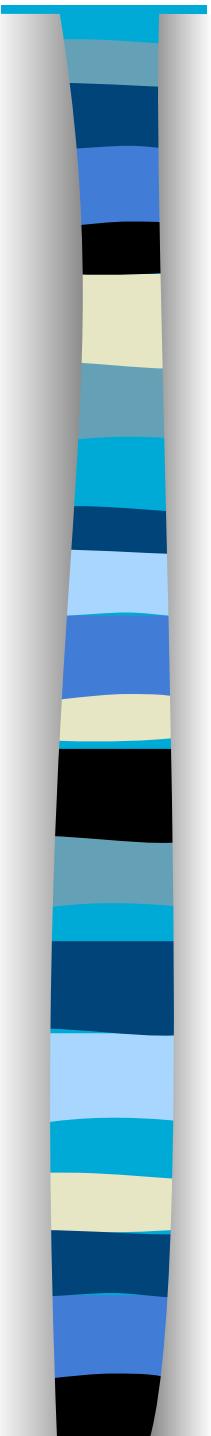


# Conditions Affecting Athletes

Topography refers to:

- A. The temperature at the event
- B. The weather at the event
- C. The amount of water available at the event
- D. The surface features at the event

Q

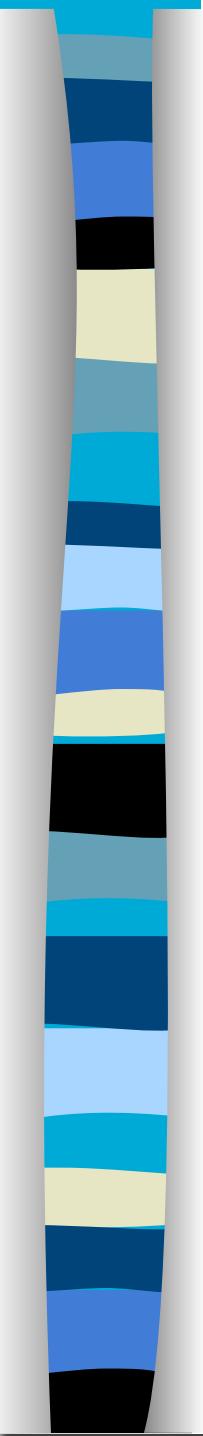


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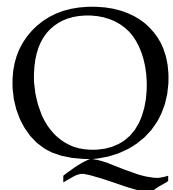
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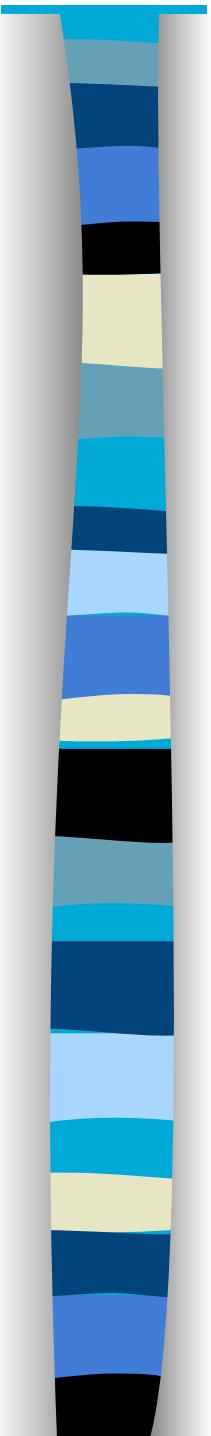


# Conditions Affecting Athletes

Hyperthermia may occur during sporting events where:

- A. The athlete is inactive for long periods of time between events and stiffens up
- B. The athlete is exposed to high altitude for prolonged periods of time
- C. The athlete is exposed to heat and sun for prolonged periods of time
- D. The athlete is exposed to cold or wet weather for prolonged periods of time





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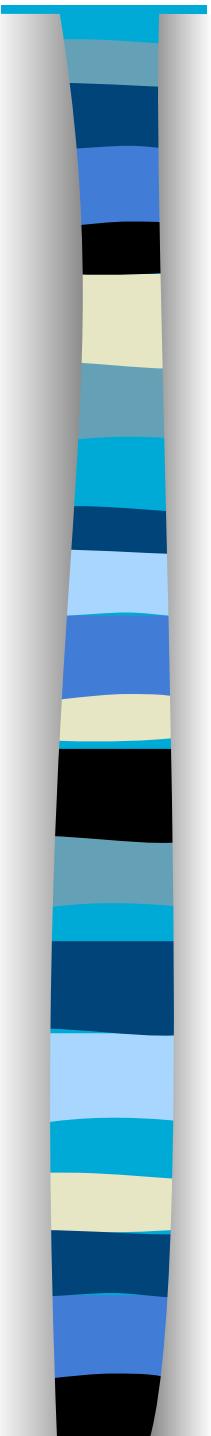
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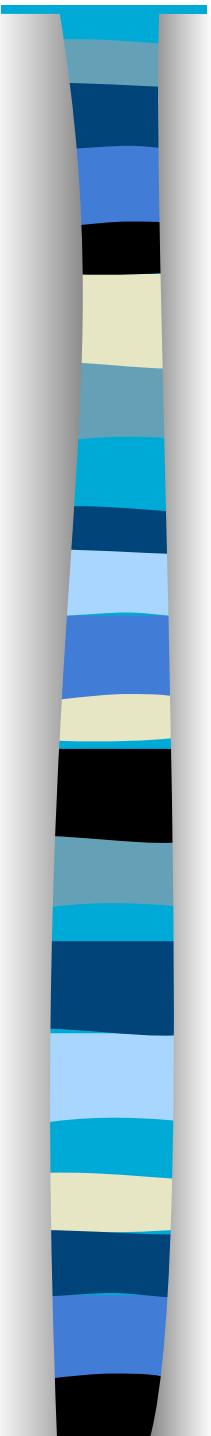


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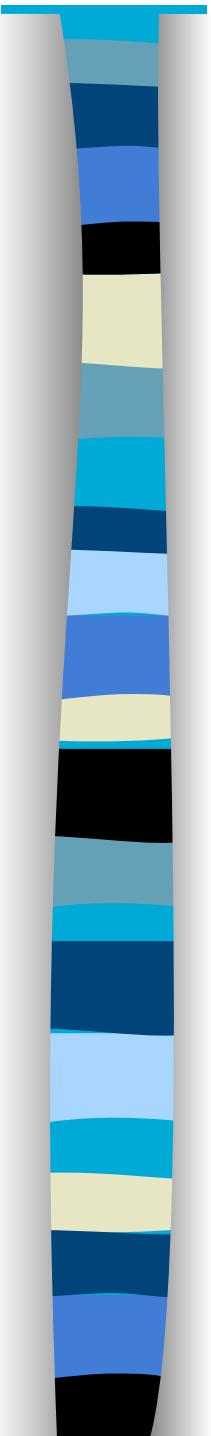


# Conditions Affecting Athletes

Heat exhaustion is a form of:

- A. Altitude sickness
- B. Hyperthermia
- C. Hypothermia
- D. Muscle fatigue

Q

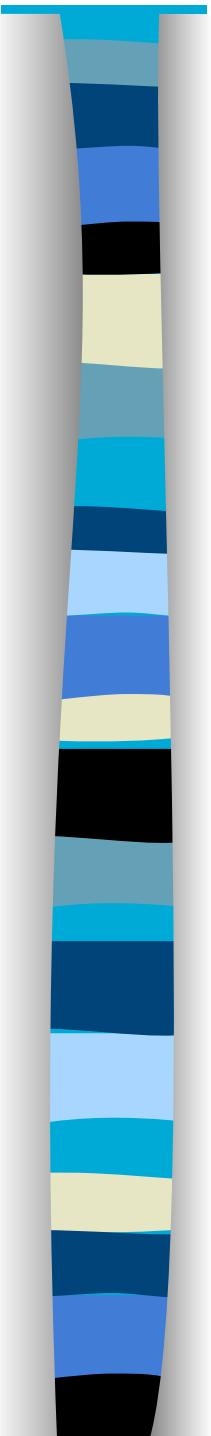


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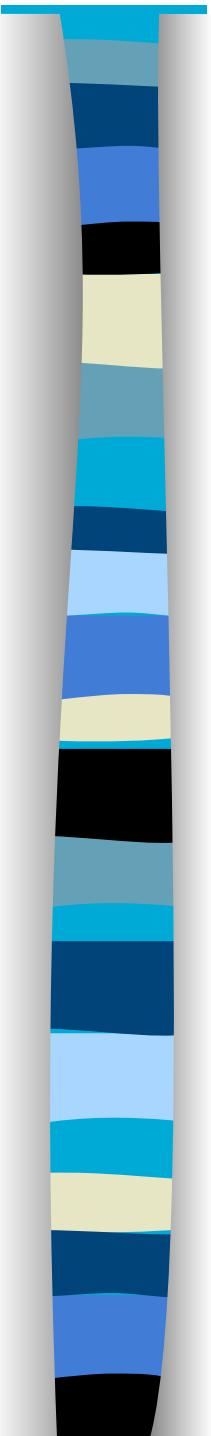


# Conditions Affecting Athletes

Heat stroke is:

- A. A condition directly related to altitude
- B. A life-threatening condition
- C. An indication for massage
- D. A condition directly related to topography

Q

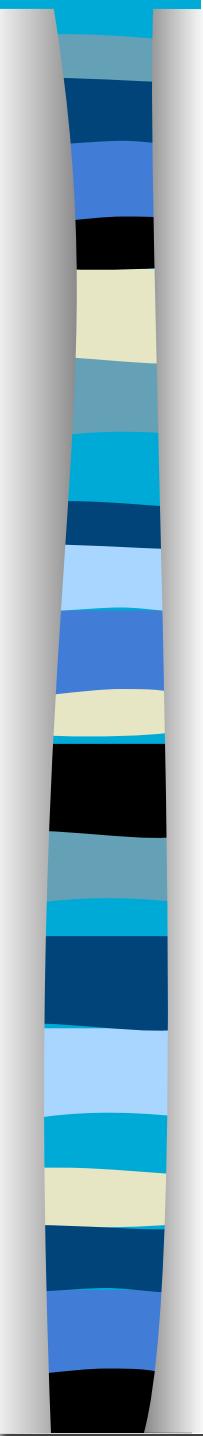


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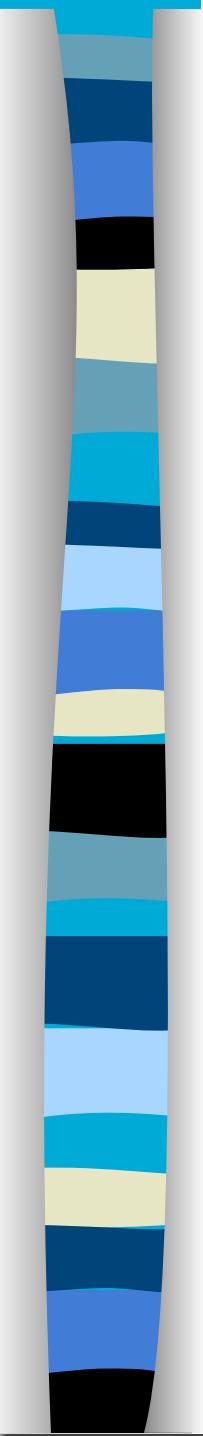


# Conditions Affecting Athletes

One possible cause of delayed-onset muscle soreness is:

- A. Damage to the sympathetic nervous system firing pattern
- B. Ruptures in major tendons
- C. Damage to the parasympathetic nervous system firing pattern
- D. Ruptures in the sarcolemma

Q

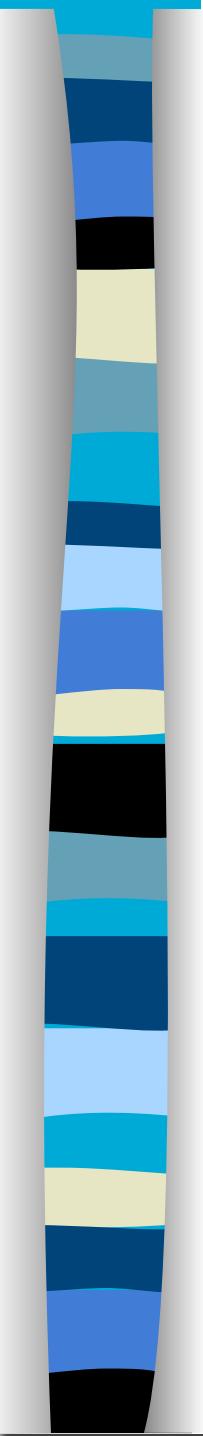


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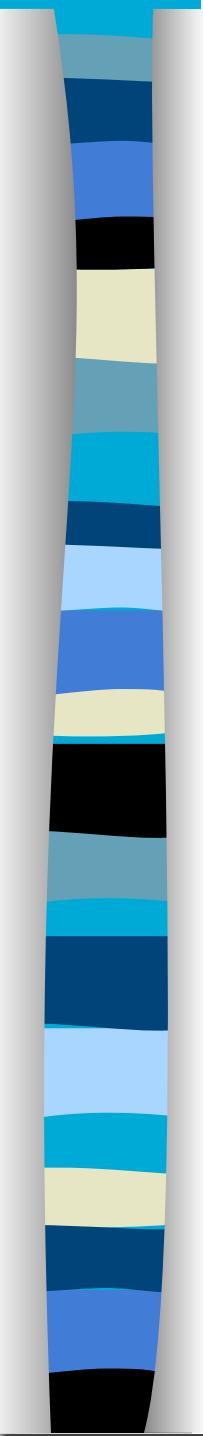


# Conditions Affecting Athletes

Massage therapists who provide sports massage at events should be able to recognize the signs and symptoms of:

- A. Skin cancer and obesity
- B. Diabetes and fibromyalgia
- C. Pregnancy and Osteoporosis
- D. Hyperthermia and hypothermia

Q

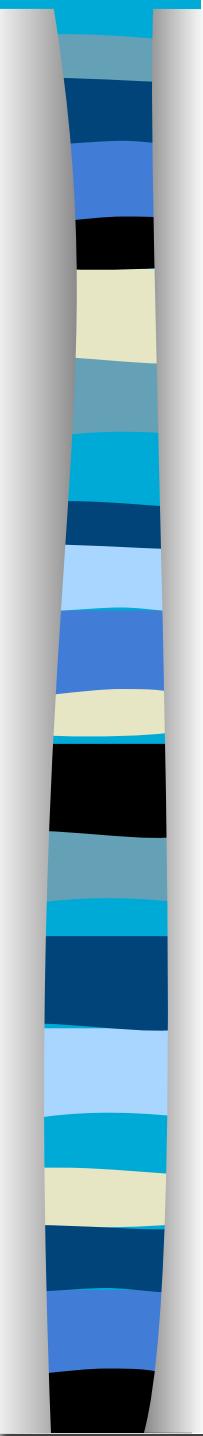


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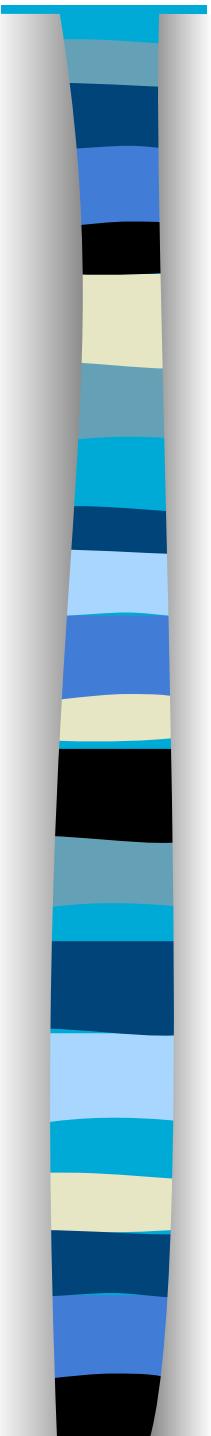


# Conditions Affecting Athletes

Mountaineers, skiers, and ice skaters are probably more prone to this condition than other athletes:

- A. Cryogenics
- B. Frostnip
- C. Delayed-onset muscle soreness
- D. Hyperthermia

Q

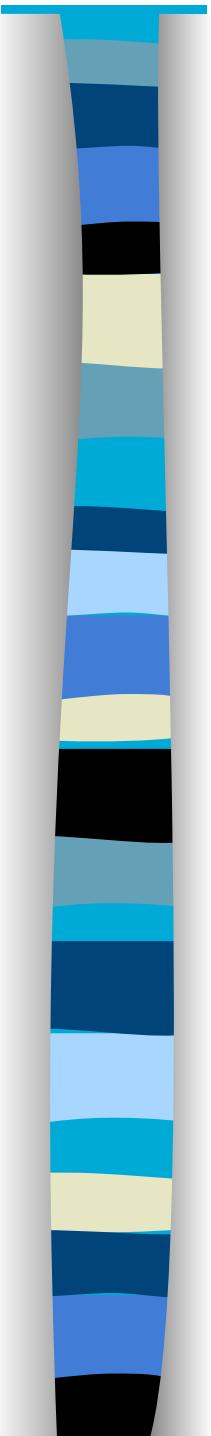


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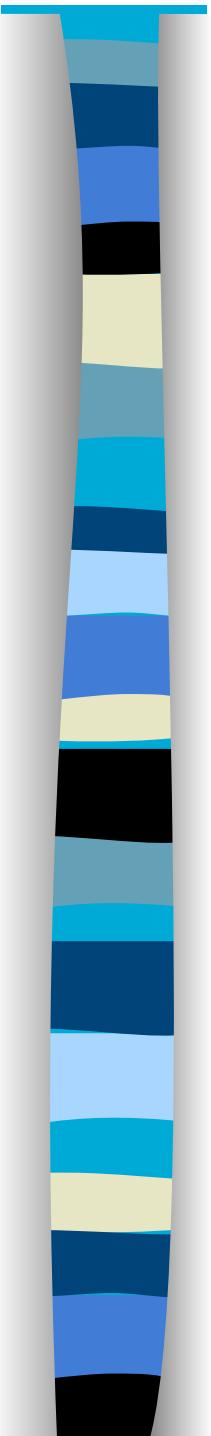


# Conditions Affecting Athletes

An environmental condition that might affect an athlete at an event is:

- A. Altitude
- B. Training preparation
- C. Stress level of the athlete
- D. Attitude

Q

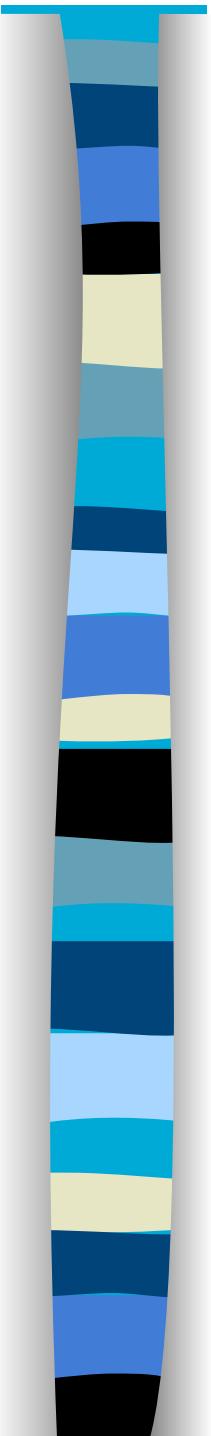


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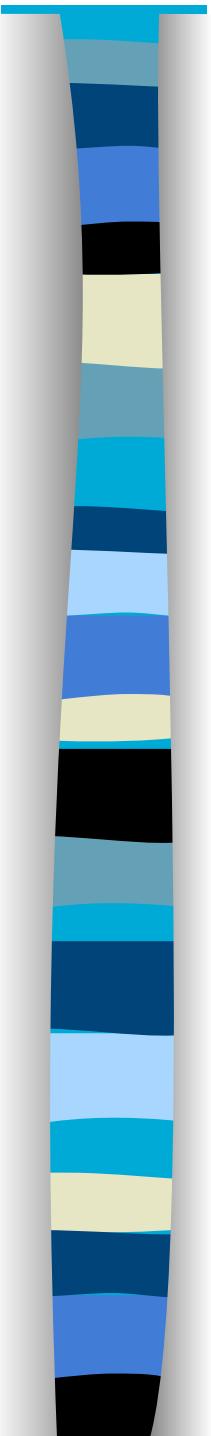


# Conditions Affecting Athletes

A general term for a number of heat-related characteristics associated with illness is:

- A. Topography
- B. Hypothermia
- C. Frostbite
- D. Hyperthermia

Q

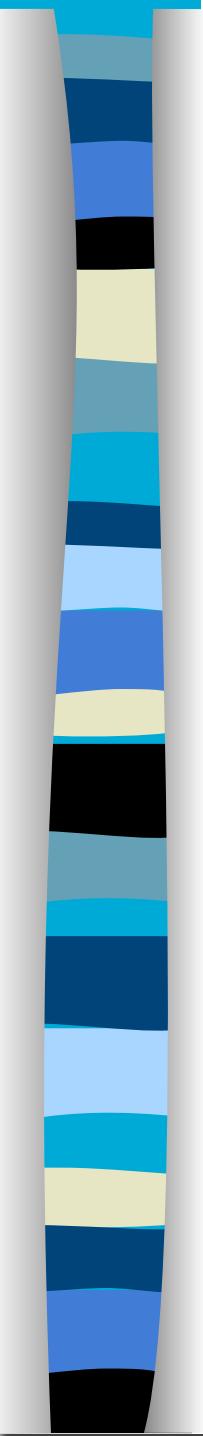


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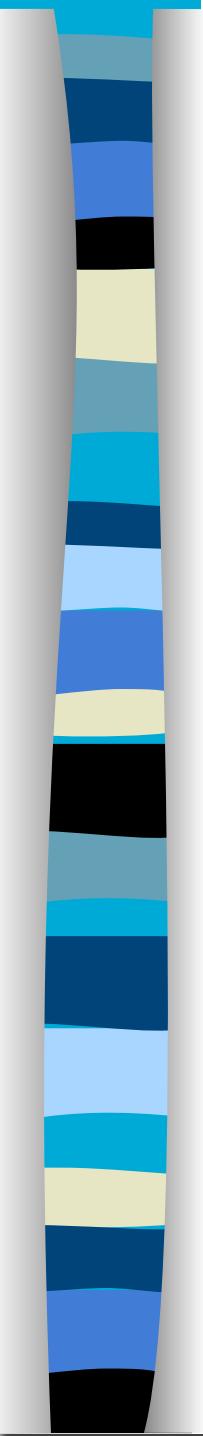


# Conditions Affecting Athletes

A condition related to cold temperatures characterized by freezing of the tissues affecting the hands, feet, nose, cheeks, and ears is:

- A. Frostnip
- B. Hypothermia
- C. Hyperthermia
- D. Frostbite

Q

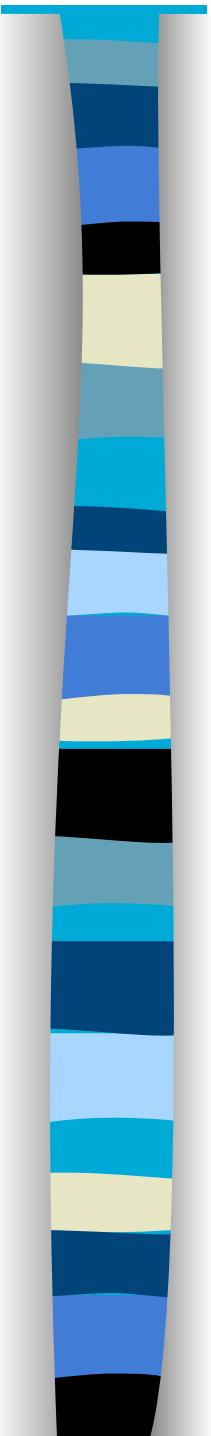


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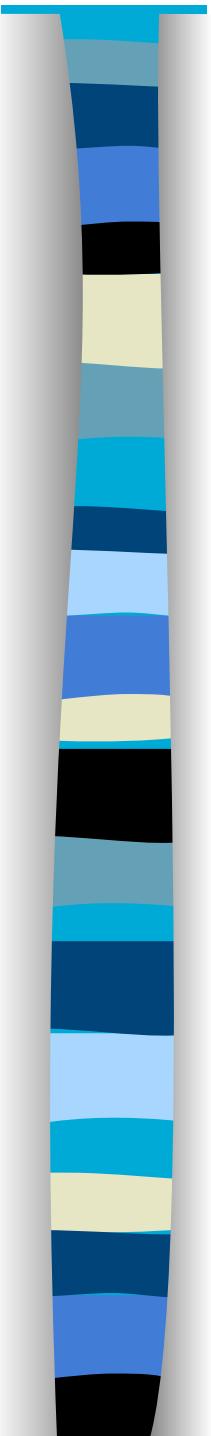


# Conditions Affecting Athletes

A condition related to cold temperatures characterized by whiteness of the skin and the formation of ice crystals on the skin's surface is:

- A. Frostnip
- B. Frostbite
- C. Hypothermia
- D. Hyperthermia

Q

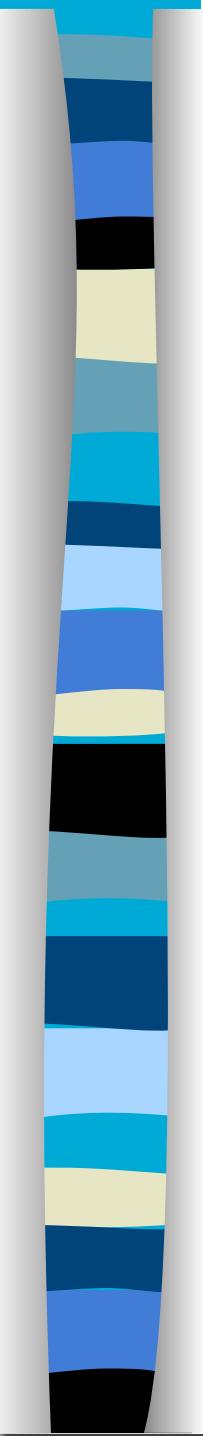


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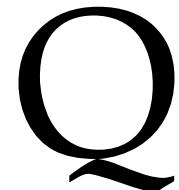
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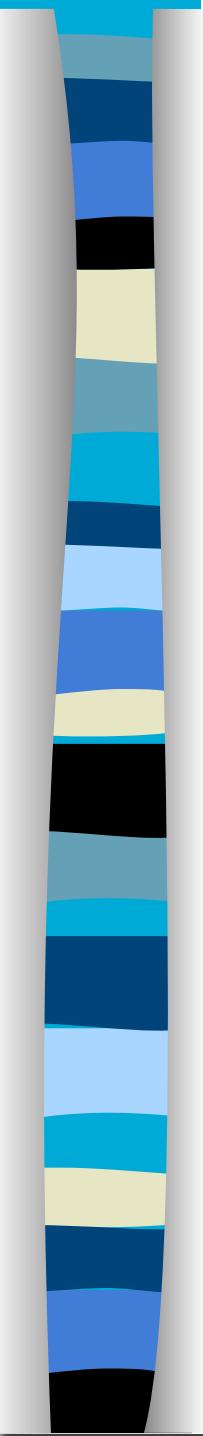


# Conditions Affecting Athletes

A life-threatening condition in which the core temperature of the body falls below 96 degrees F, and is characterized by pronounced shivering, numbness, and a feeling of cold throughout the body is:

- A. Hyperthermia
- B. Frostnip
- C. Frostbite
- D. Hypothermia



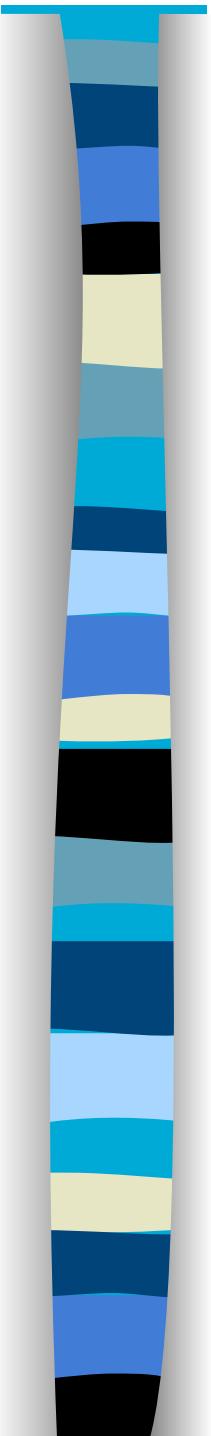


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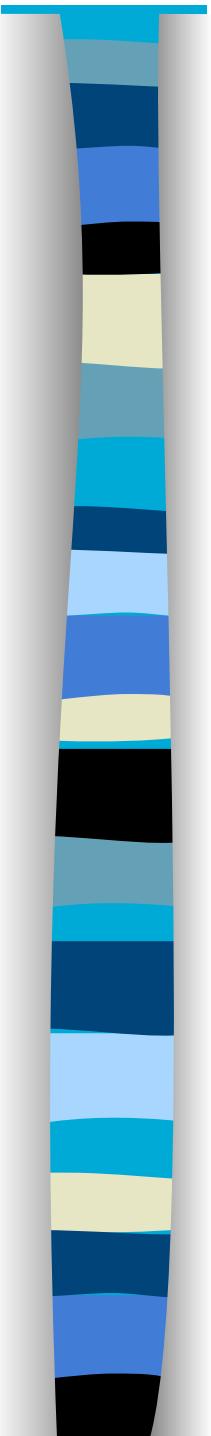


# Conditions Affecting Athletes

A life-threatening condition related to heat characterized by red, flushed skin that is hot and dry to the touch, a strong rapid heartbeat, irritability, confusion, headache, dizziness, and nausea is:

- A. Hypothermia
- B. Heat stroke
- C. Heat exhaustion
- D. Altitude sickness

Q

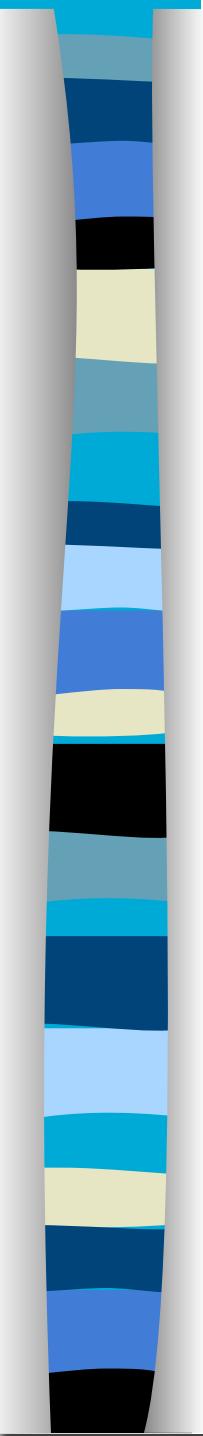


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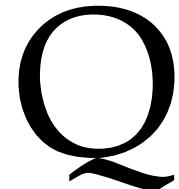
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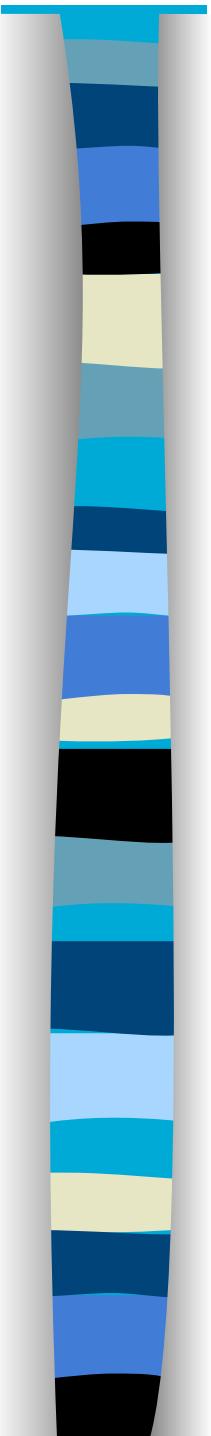


# Conditions Affecting Athletes

A condition related to heat characterized by pale or splotchy skin that may be cold and clammy to touch, heavy sweating, shallow and rapid breathing, weakness, fatigue, and possible fainting is:

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- C. Altitude sickness
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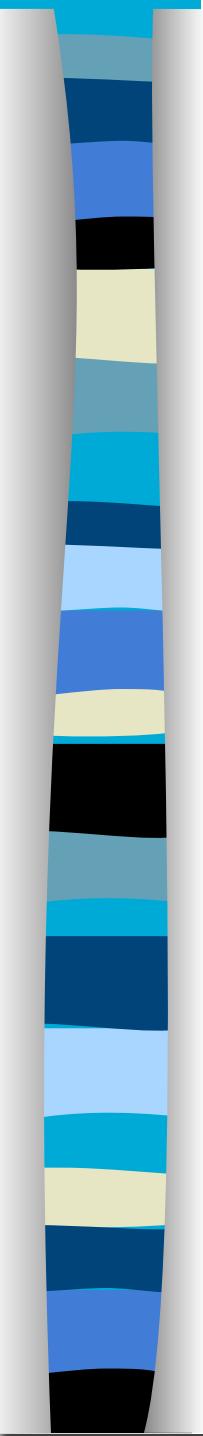


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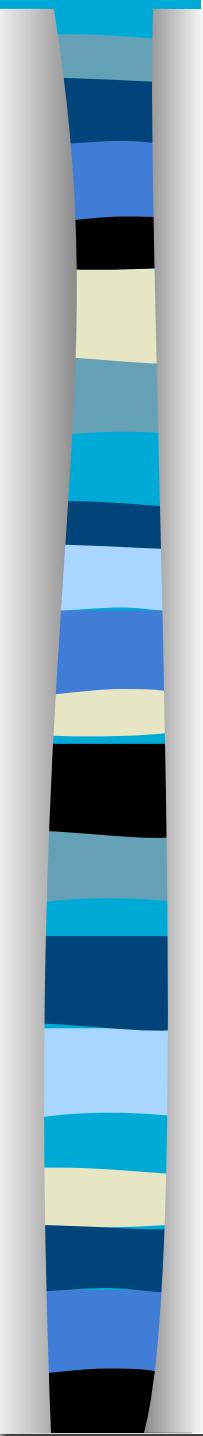


# Conditions Affecting Athletes

Muscle pain, soreness, and stiffness felt 12–48 hours after exercise is called:

- A. Delayed-onset muscle soreness
- B. Intra-event muscle soreness
- C. Immediate-onset muscle soreness
- D. Pre-event muscle soreness

Q



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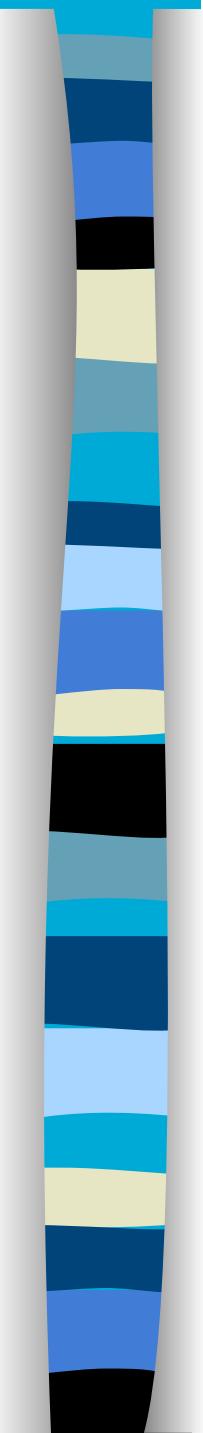




# ABMP Exam Coach

Special Populations:  
Clients at the end of life

End of Life

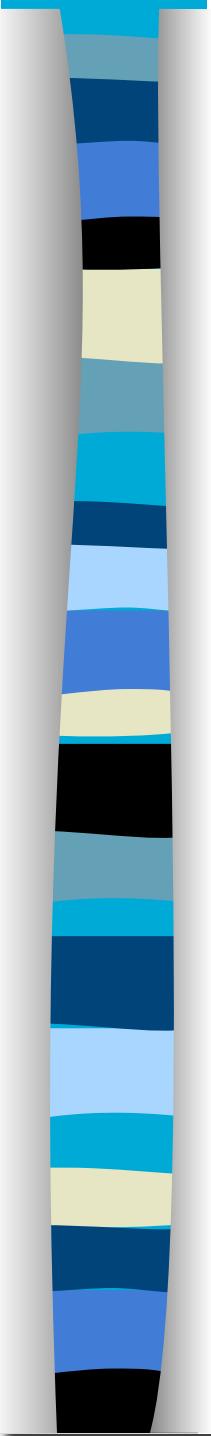


# End of Life

Care provided to a person nearing death (due to natural causes or terminal illness) is:

- A. Terminal care
- B. Therapeutic care
- C. Condition management
- D. End-of-life care

Q

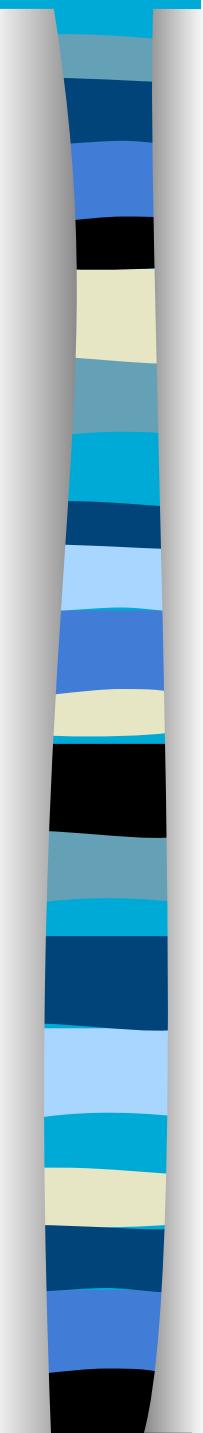


# End of Life

Care provided to a person nearing death (due to natural causes or terminal illness) is:

- A. Terminal care
- B. Therapeutic care
- C. Condition management
- D. End-of-life care**

A

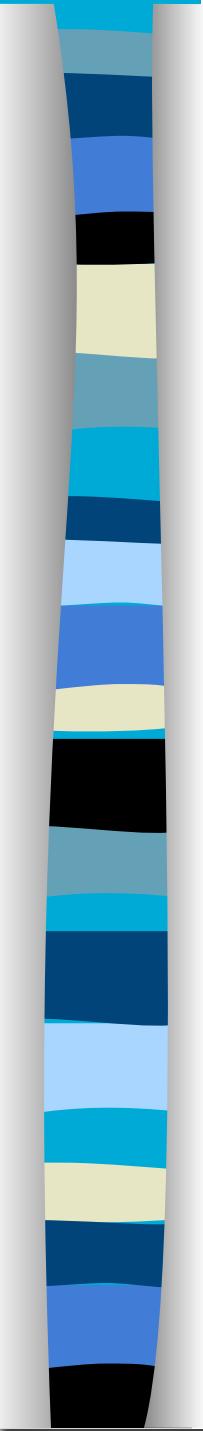


# End of Life

One goal of end-of-life care is to:

- A. Maintain all available range of motion
- B. Reduce muscular tension
- C. Make the person as comfortable as possible
- D. Reduce muscular adhesions

Q

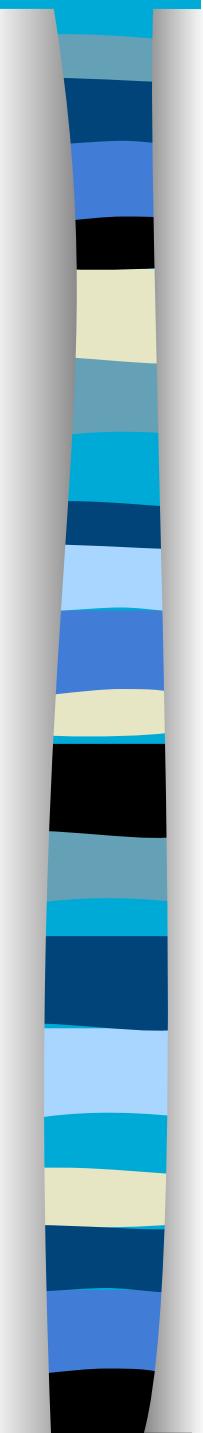


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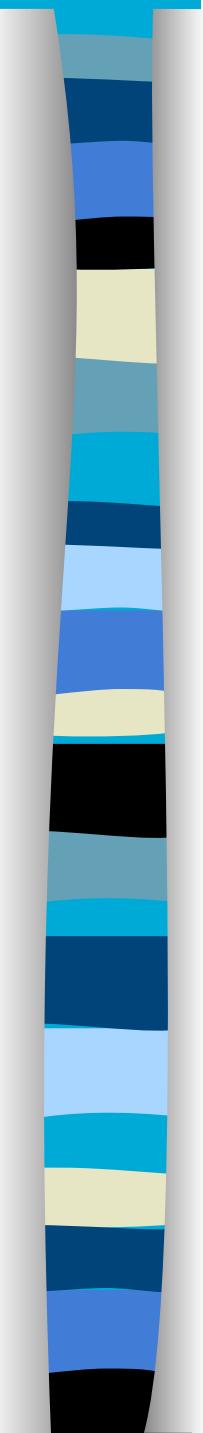


# End of Life

Terminal illness is:

- A. A condition that responds well to aggressive medications
- B. A disease that is considered ultimately incurable and likely to cause death within 5 years
- C. A condition that responds well to massage and other complementary therapies
- D. A disease that is considered ultimately incurable and likely to cause death within a short period of time

Q

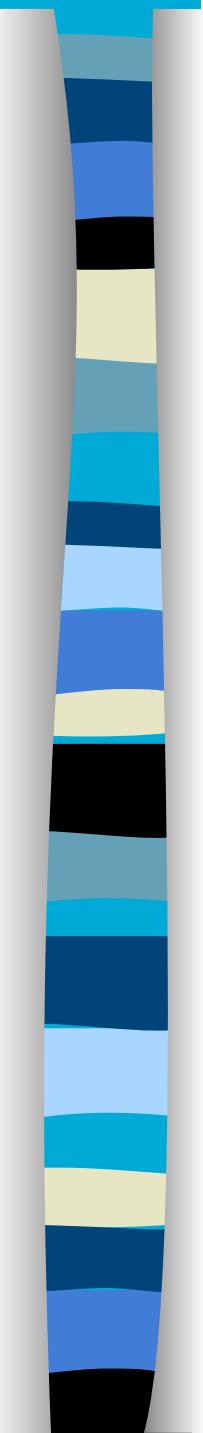


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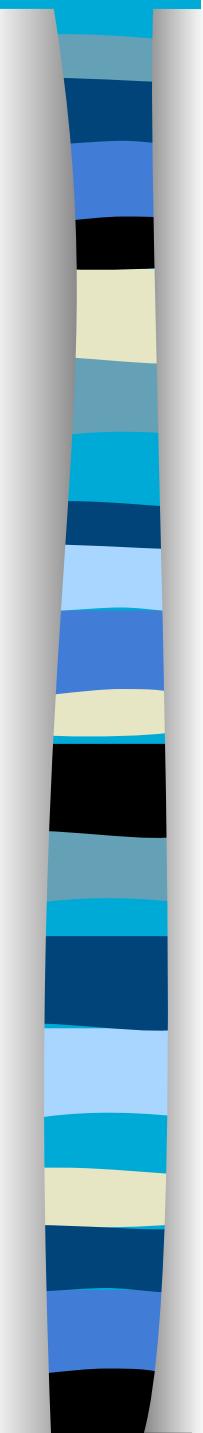


# End of Life

Massage is used for end-of-life care to:

- A. Reduce fascial restrictions and improve sleep patterns
- B. Increase range of motion in restricted joints and aid relaxation
- C. Increase relaxation, improve sleep patterns, and provide comfort
- D. Reduce muscular adhesions and provide comfort

Q



# End of Life

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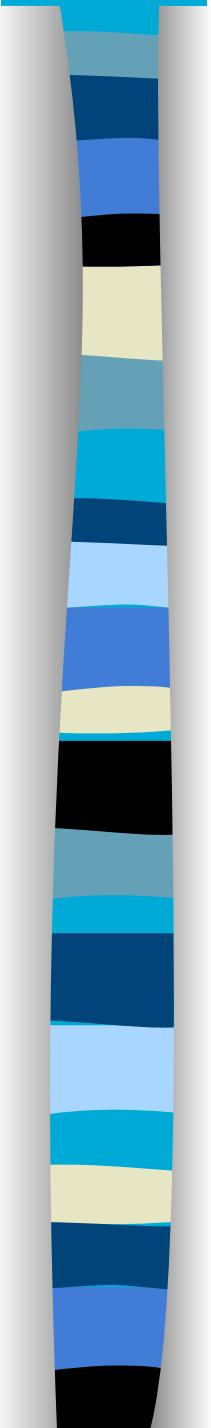




# ABMP Exam Coach

Special Populations:  
Clients at the end of life

Phases of Dying

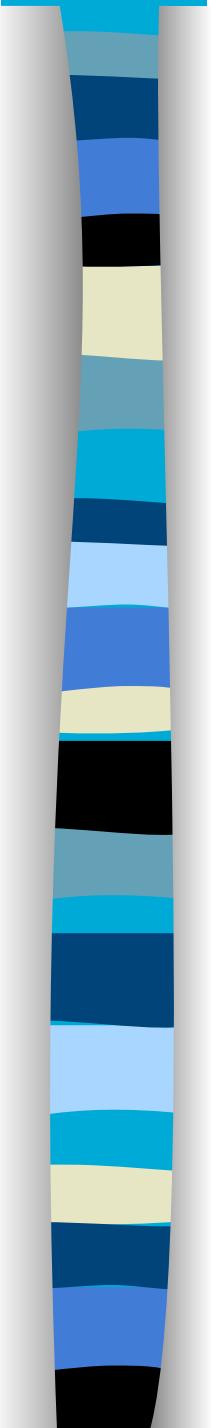


# Phases of Dying

According to the Hospice Patients Alliance, there are:

- A. Two phases of approaching death
- B. Five phases of approaching death
- C. Three phases of approaching death
- D. Four phases of approaching death

Q

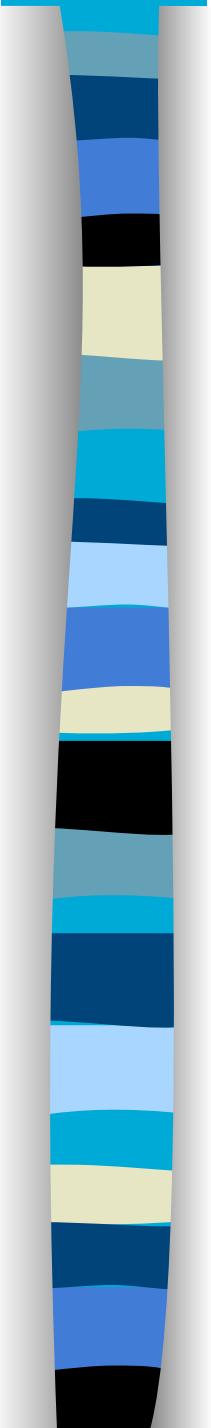


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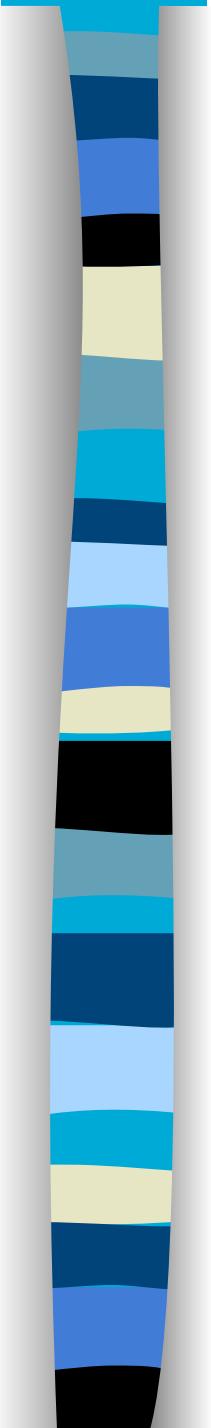


# Phases of Dying

The first phase of approaching death is called:

- A. The preactive phase of dying
- B. The post-active phase of dying
- C. The inactive phase of dying
- D. The active phase of dying

Q

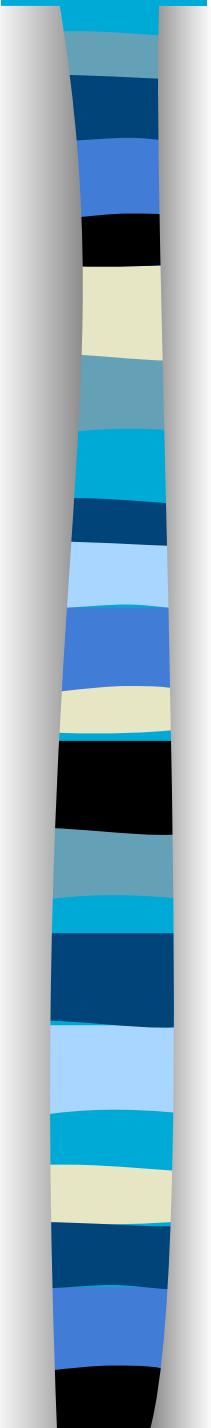


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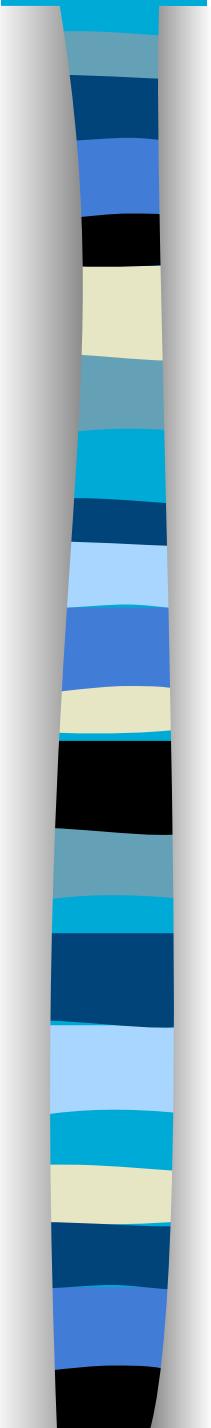


# Phases of Dying

The second phase of approaching death is called:

- A. The preactive phase of dying
- B. The inactive phase of dying
- C. The active phase of dying
- D. The post-active phase of dying

Q

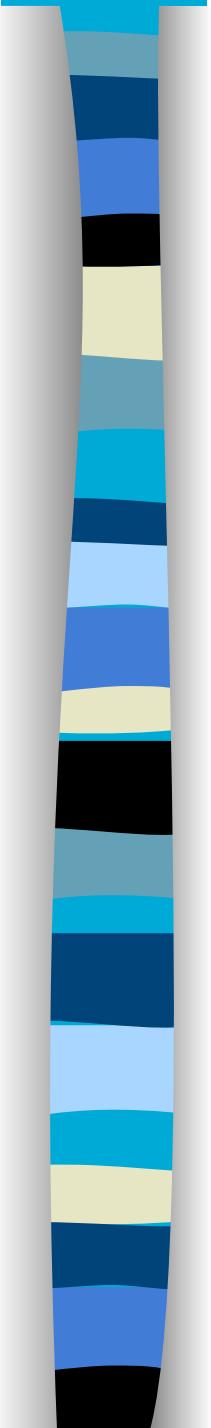


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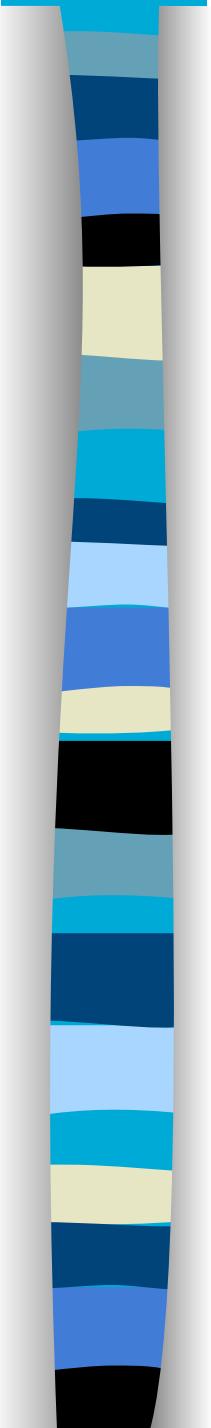


# Phases of Dying

The preactive phase of dying:

- A. Begins approximately 6 months before death
- B. Begins approximately 1 week before death
- C. Begins approximately 2 weeks before death
- D. Begins approximately 2 days before death

Q

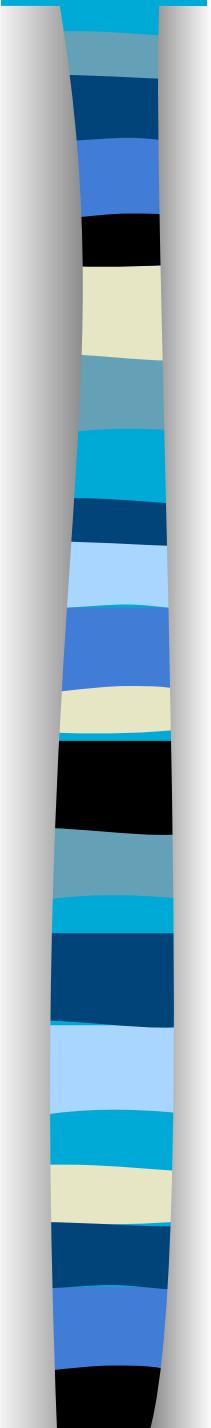


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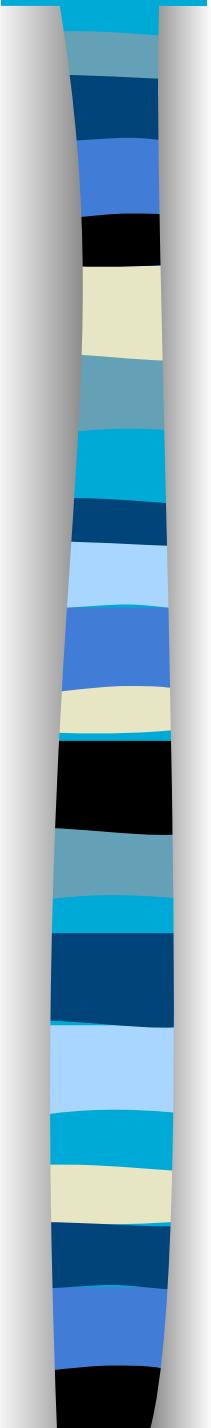
# Phases of Dying

During the preactive phase of dying, a person:

- A. Demonstrates an unresponsive state
- B. Demonstrates increased restlessness and confusion
- C. Demonstrates increased appetite and thirst
- D. Demonstrates severe agitation, including hallucinations



Q

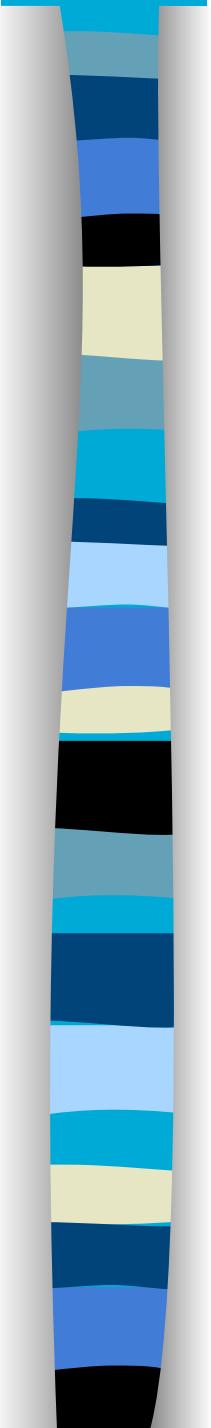


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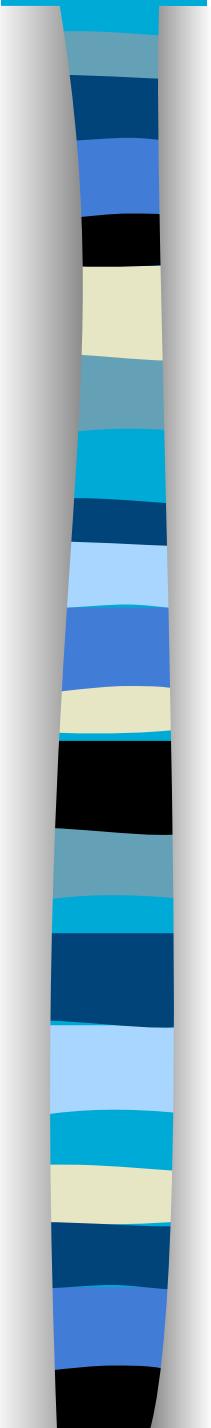


# Phases of Dying

During the preactive phase of dying, a person:

- A. Demonstrates pronounced personality changes
- B. Demonstrates an unresponsive state
- C. Demonstrates the inability to speak
- D. Demonstrates reduced food and liquid consumption

Q

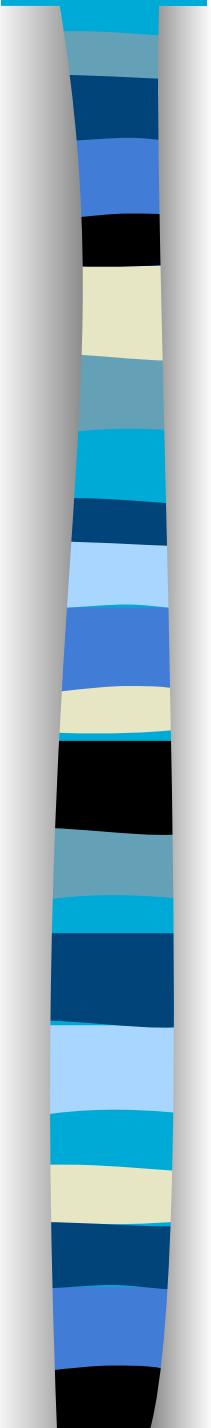


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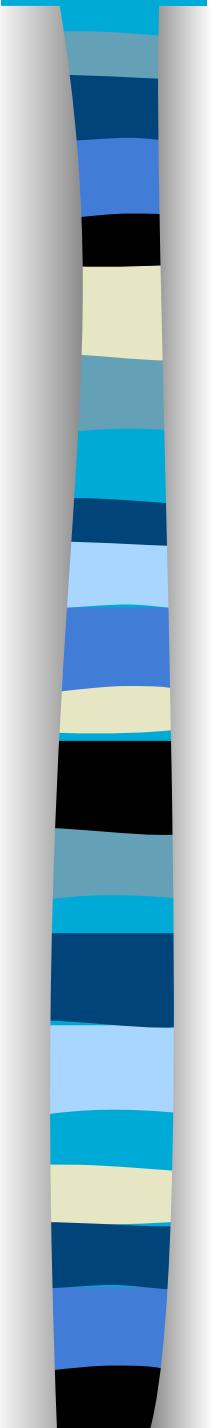


# Phases of Dying

During the preactive phase of dying, a person:

- A. Is unable to speak
- B. Demonstrates severe agitation, including hallucinations
- C. Is unable to swallow food or liquids
- D. Develops edema in the extremities and has difficulty healing from infections

Q

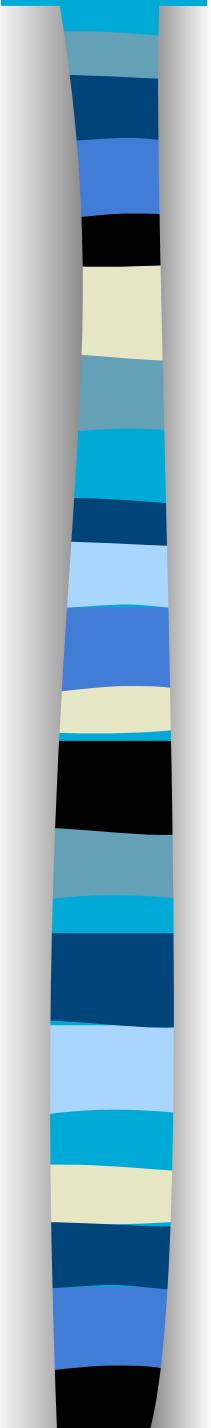


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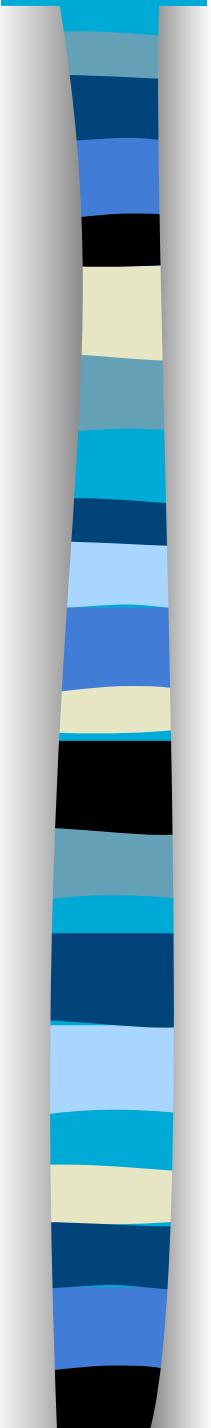


# Phases of Dying

During the active phase of dying, a person might:

- A. Change positions frequently
- B. Demonstrate increased hunger and thirst
- C. Demonstrate severe agitation, including hallucinations
- D. May develop edema in the extremities

Q

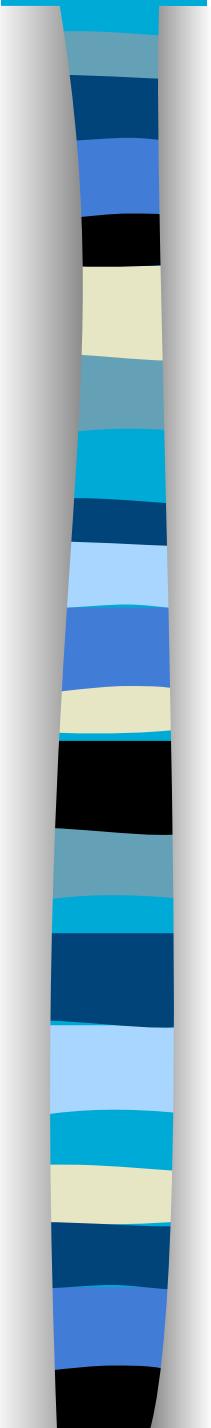


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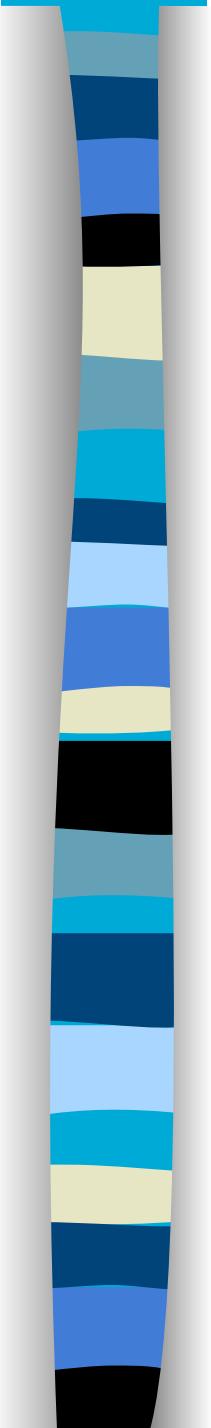


# Phases of Dying

A person's extremities may feel very cold and turn bluish or purple during:

- A. The preactive phase of dying
- B. The active phase of dying
- C. The inactive phase of dying
- D. The post-active phase of dying

Q

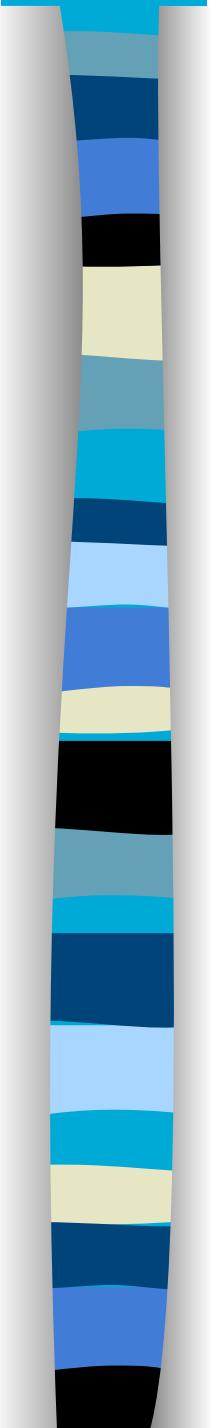


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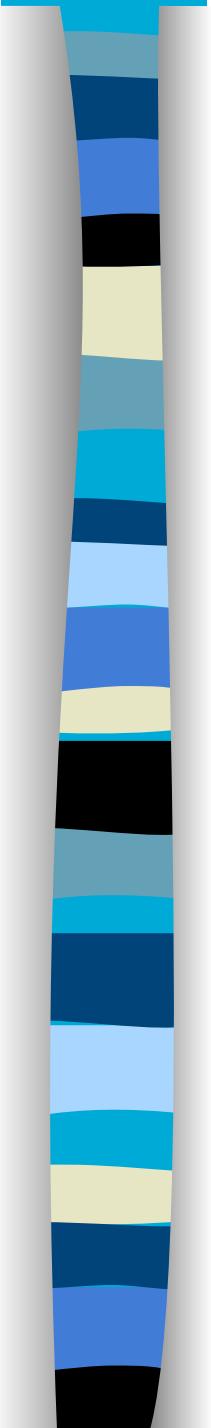


# Phases of Dying

During the active phase of dying, a person might:

- A. Demonstrate increased hunger
- B. Demonstrate abnormal breathing patterns including long pauses in breathing
- C. Develop edema in the extremities
- D. Demonstrate increased hunger and thirst

Q

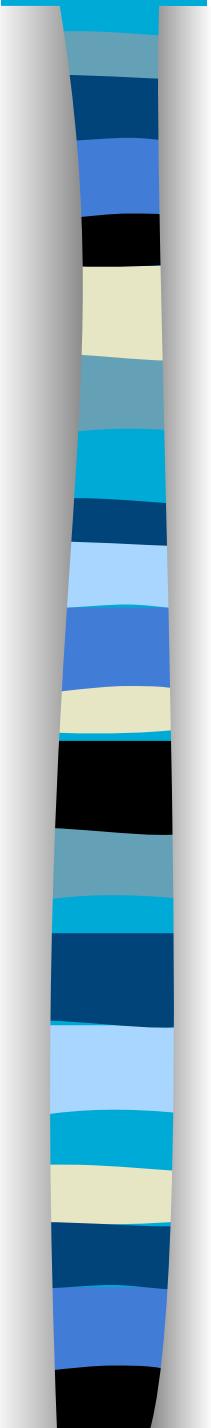


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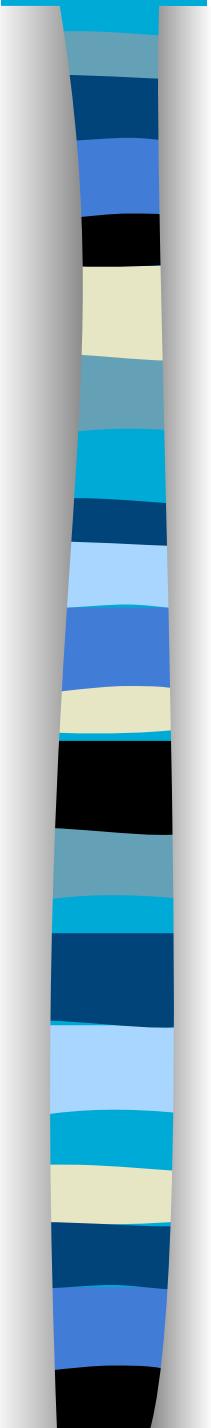


# Phases of Dying

If a person is restless and changes position often, he or she is probably in the:

- A. Inactive phase of dying
- B. Active phase of dying
- C. Preactive phase of dying
- D. Post-active phase of dying

Q

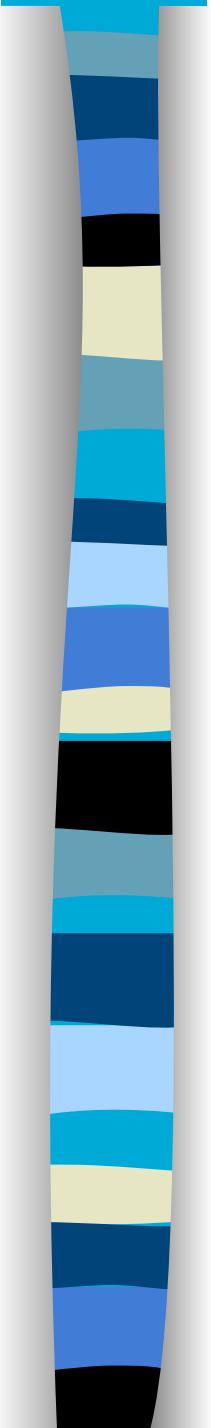


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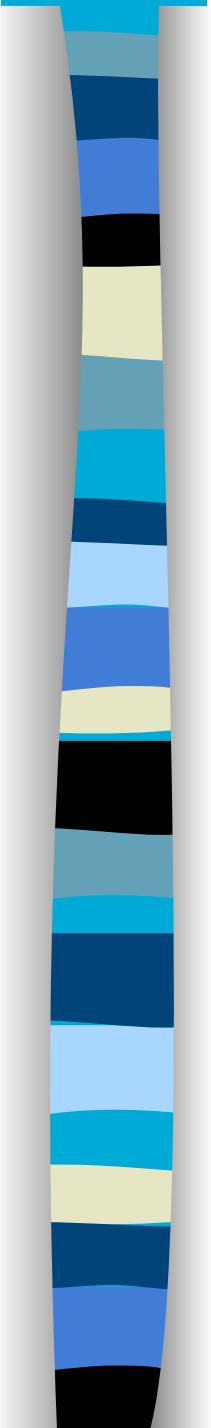


# Phases of Dying

During the active phase of dying, a person:

- A. May develop edema in the extremities
- B. May be completely unresponsive
- C. May demonstrate increased hunger and thirst
- D. May demonstrate increased hunger

Q

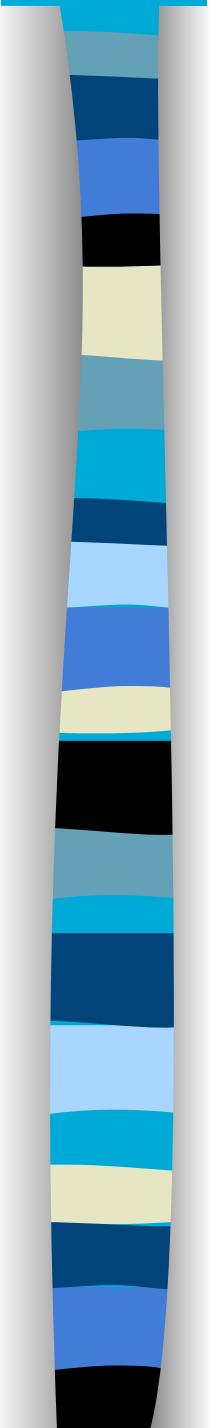


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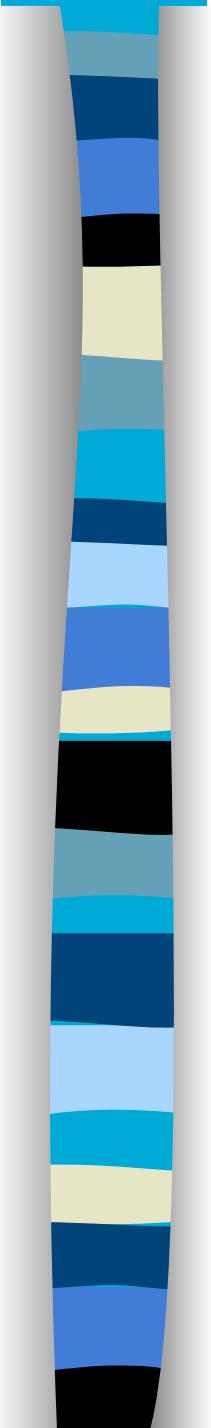


# Phases of Dying

If a person holds the body in a rigid and unchanging position, or if the jaw drops or is held in a sideways position, he or she is:

- A. In the active phase of dying
- B. In the inactive phase of dying
- C. In the preactive phase of dying
- D. In the post-active phase of dying

Q

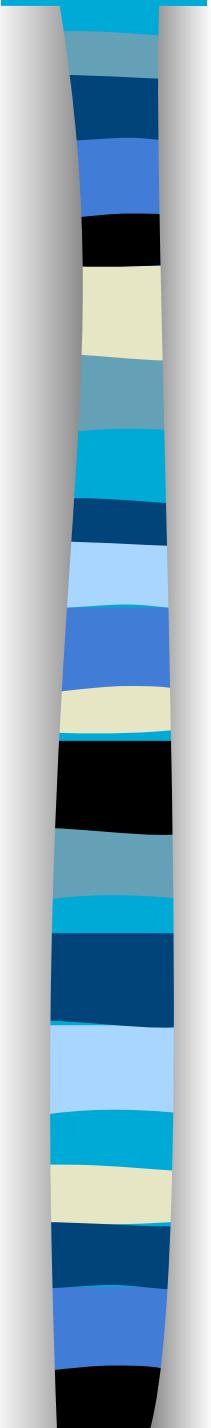


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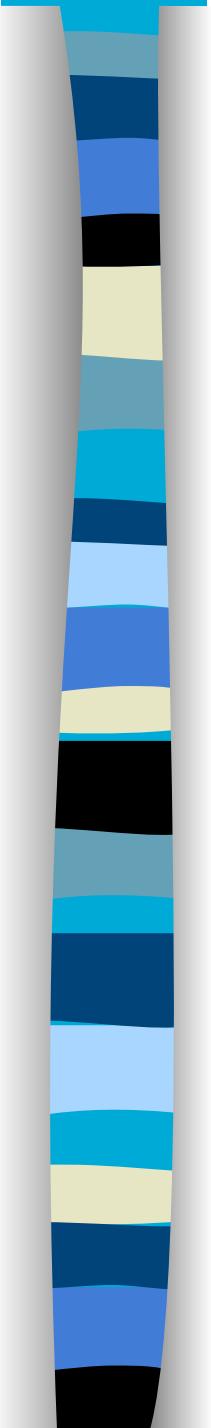


# Phases of Dying

A person's extremities may feel very cold and turn bluish or purple during:

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- B. The post-active phase of dying
- C. The active phase of dying
- D. The inactive phase of dying

Q

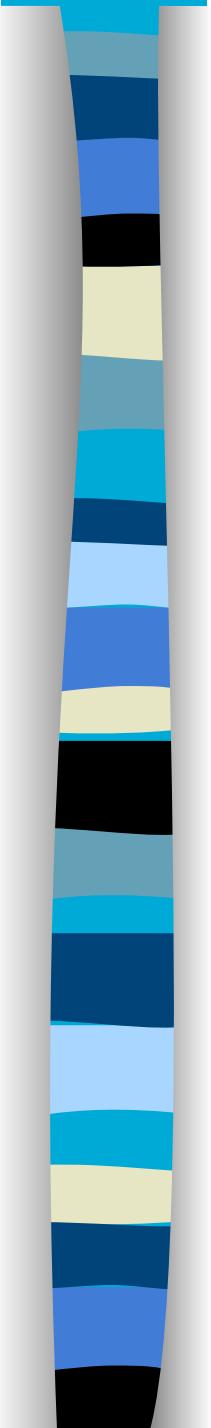


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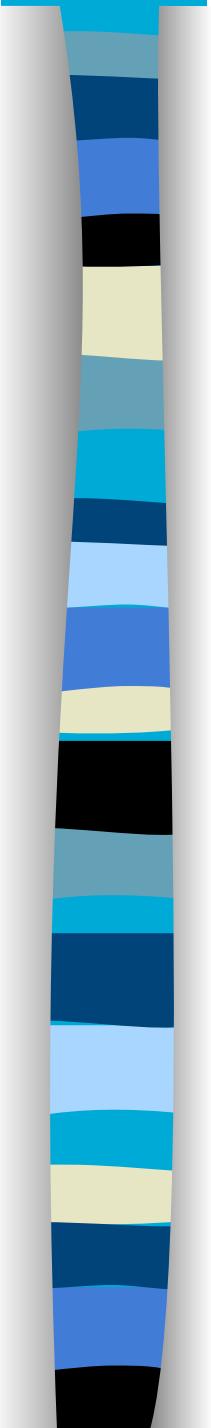


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Q

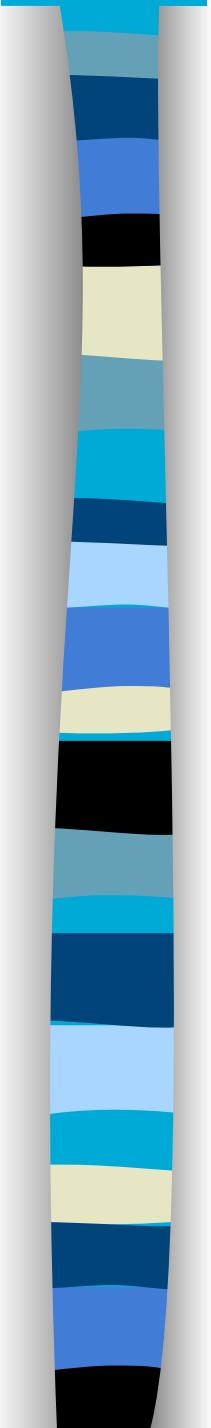


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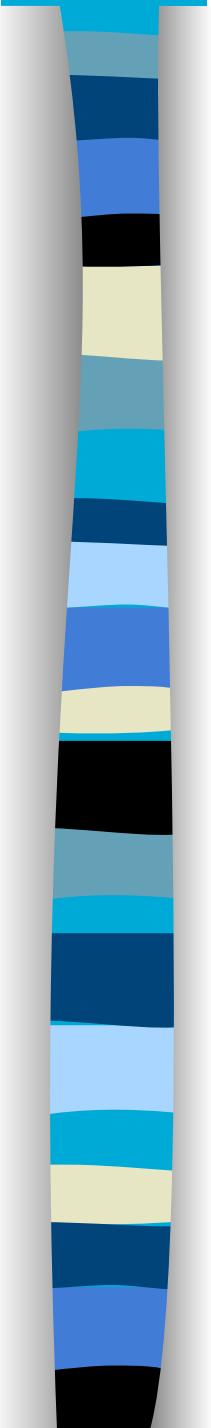


# Phases of Dying

If a person keeps his or her mouth open for breathing, but is unable to speak, he/she is probably in the:

- A. Preactive phase of dying
- B. Inactive phase of dying
- C. Post-active phase of dying
- D. Active phase of dying

Q



# Phases of Dying

If a person keeps his or her mouth open for breathing, but is unable to speak, he/she is probably in the:

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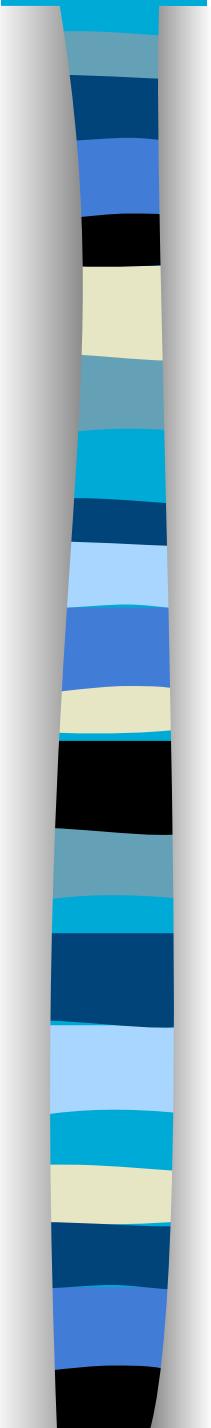




# ABMP Exam Coach

Special Populations:  
Clients at end of life

Techniques

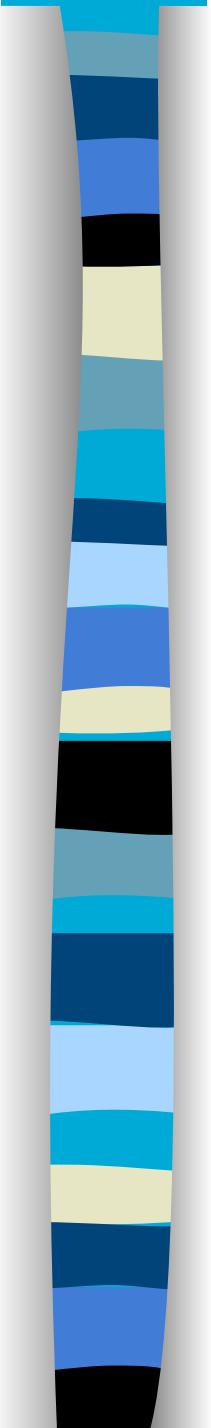


# Techniques

Petrissage strokes during end-of-life care are:

- A. Indicated to reduce adhesions
- B. Indicated as soothing and calming
- C. Only applied during the active phase of dying
- D. Contraindicated as too aggressive

Q

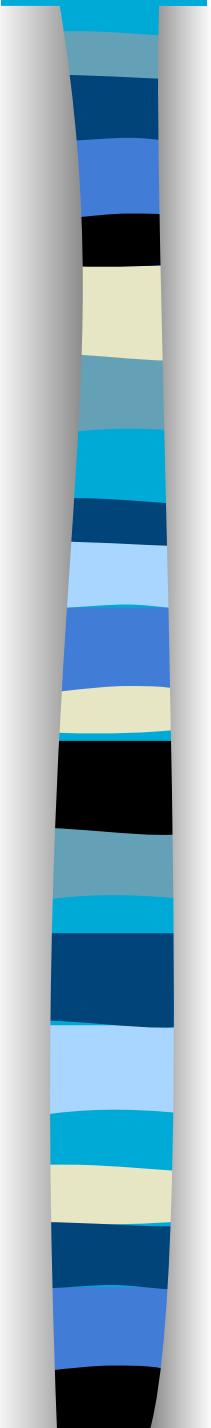


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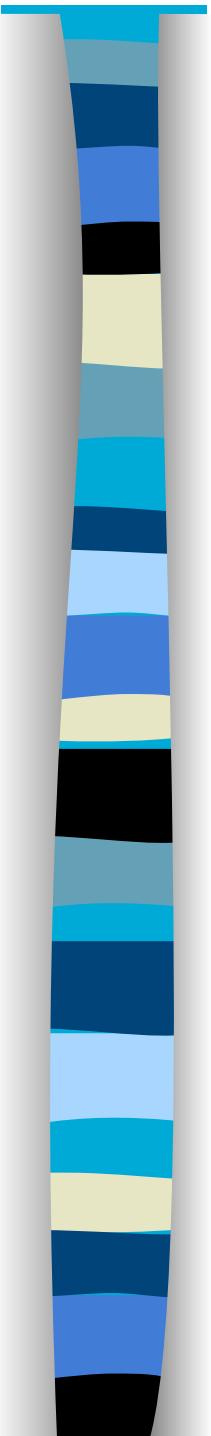


# Techniques

Gentle and calming strokes during end-of-life care are:

- A. Indicated to calm and relax the client
- B. Contraindicated in the active stage of dying
- C. Contraindicated as too sedating for the client
- D. Only used with caution at the direction of a physician

Q

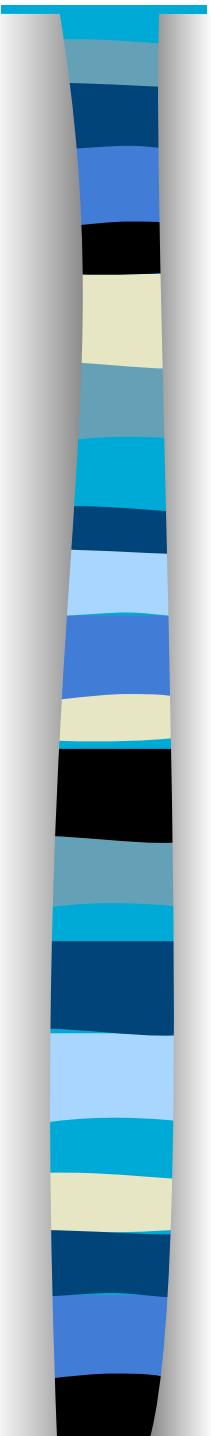


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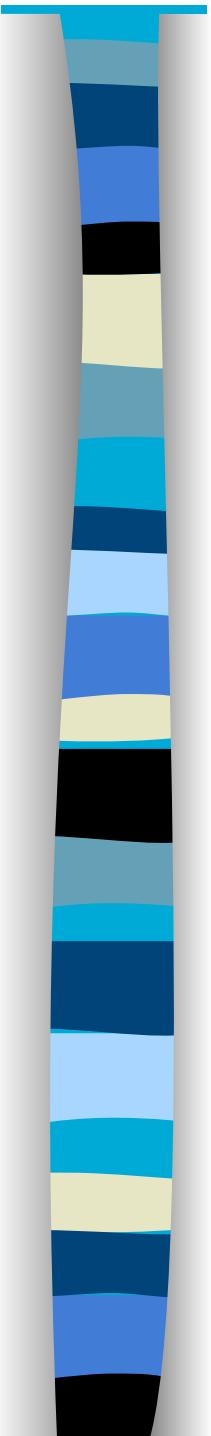


# Techniques

Holding strokes at the base of the neck during end-of-life care are:

- A. Never used during the active phase of dying
- B. Never used during the preactive phase of dying
- C. Contraindicated as too sedating for the client
- D. Indicated to calm and relax the client

Q

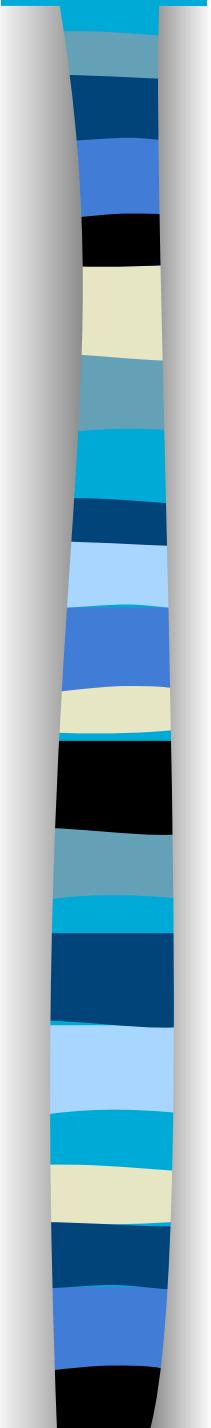


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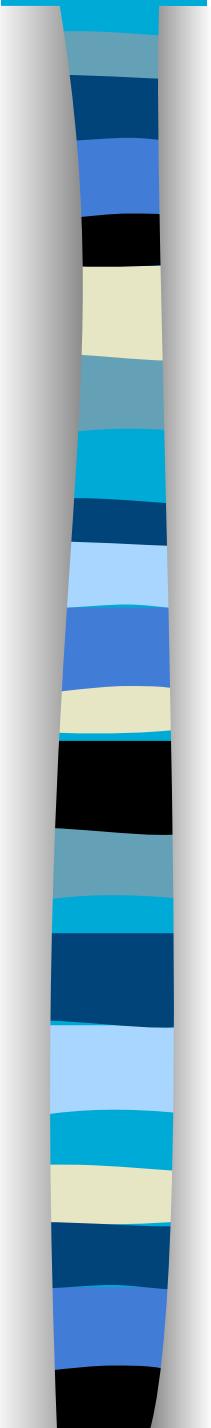


# Techniques

Gentle, passive range of motion techniques used during end-of-life care are:

- A. Contraindicated as too aggressive
- B. Used predominantly in the active phase of dying
- C. Indicated as soothing and calming
- D. Used predominantly in the preactive phase of dying

Q



# Techniques

Gentle, passive range of motion techniques used during end-of-life care are:

- A. Contraindicated as too aggressive
- B. Used predominantly in the active phase of dying
- C. Indicated as soothing and calming
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A



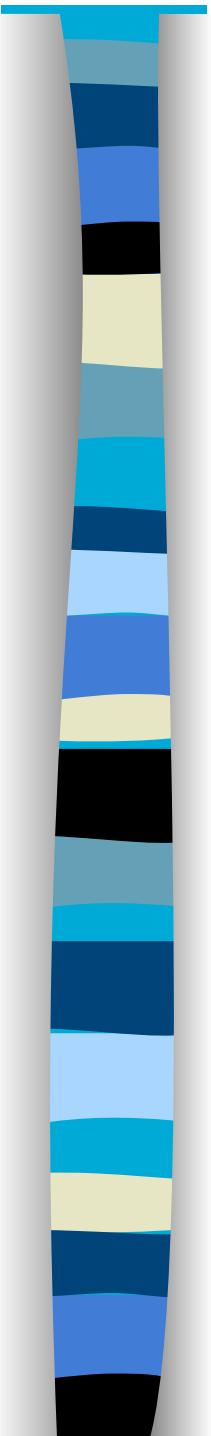




# ABMP Exam Coach

Special Populations:  
Clients at the end of life

Locations

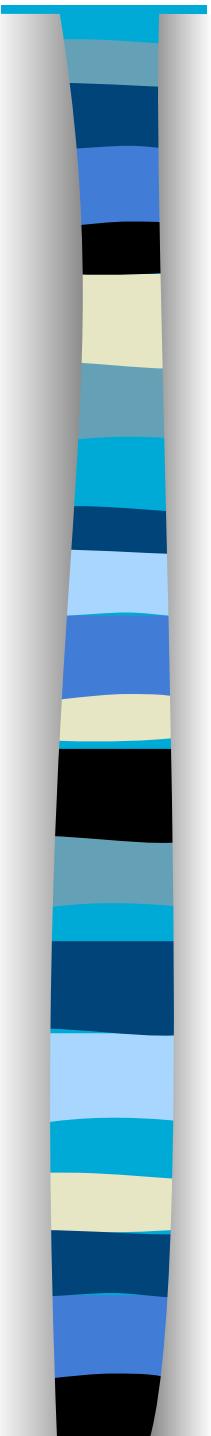


# Locations

Massage during end-of-life care is typically provided in:

- A. At a wellness center
- B. In a massage clinic
- C. A client's home
- D. In the IC

Q

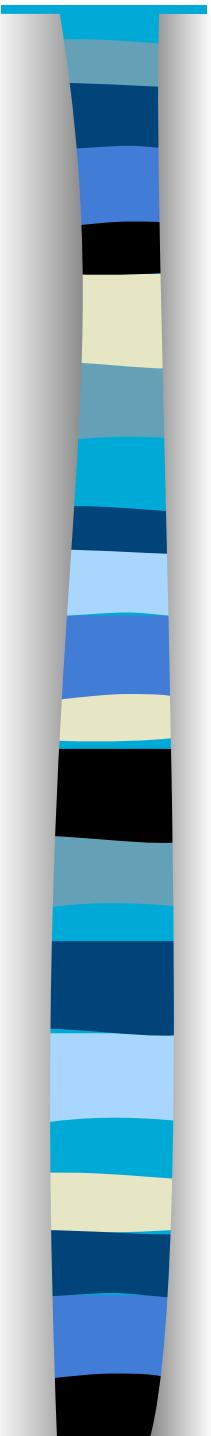


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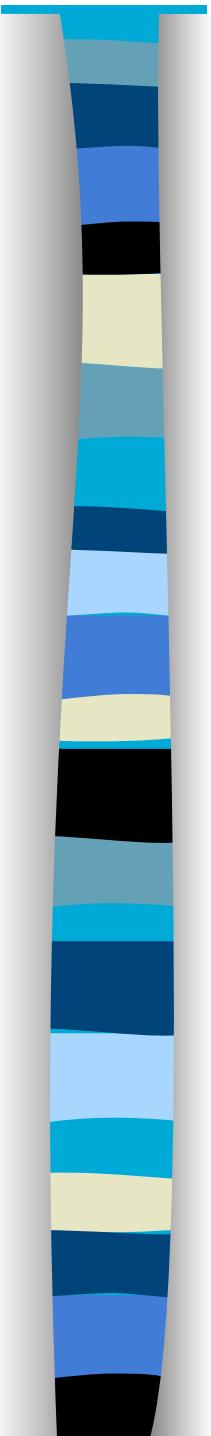


# Locations

Massage during end-of-life care is typically provided in:

- A. In a specially outfitted massage clinic
- B. In a physical therapy office
- C. A hospital room
- D. In the ICU

Q



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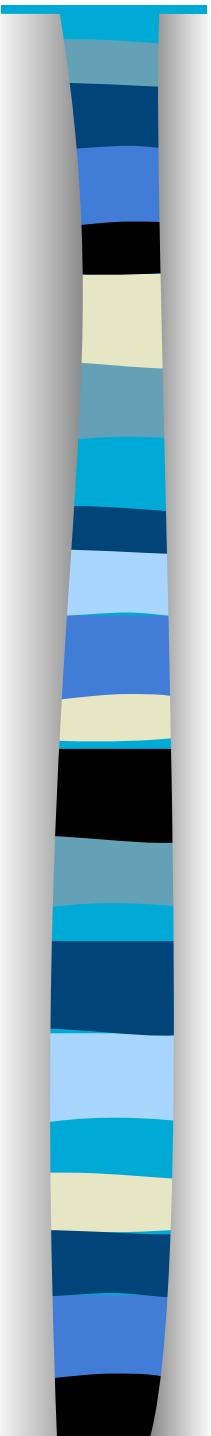




# ABMP Exam Coach

Special Populations:  
Clients with Disabilities

Types

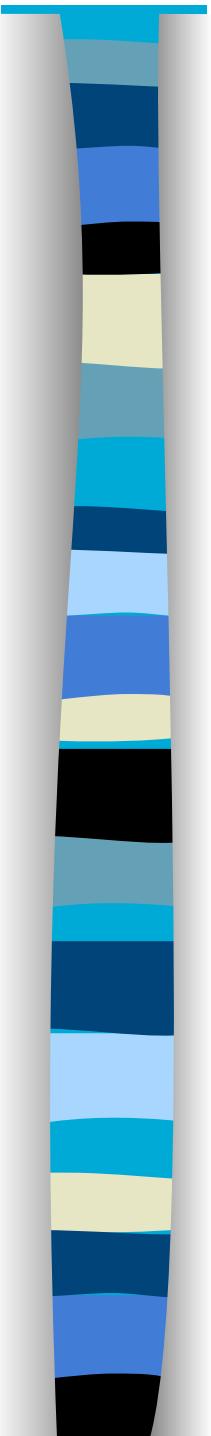


# Types

The inability to smell or taste is usually:

- A. Not considered a disability
- B. Classified as a physical disability
- C. Classified as a mental health disability
- D. Not considered in people-first language

Q

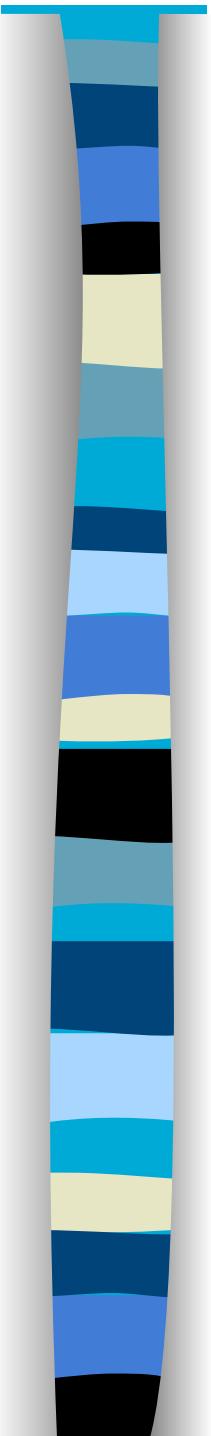


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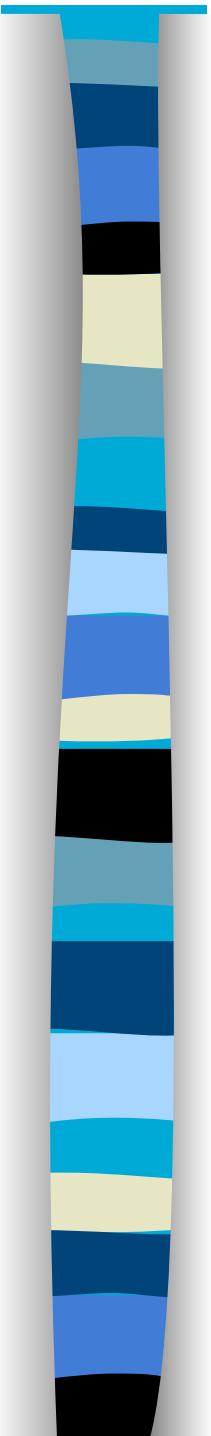


# Types

Assertive devices like wheelchairs, artificial limbs, braces, and canes might be used by people with:

- A. Mental health disabilities
- B. Sensory disabilities
- C. Intellectual disabilities
- D. Physical disabilities

Q

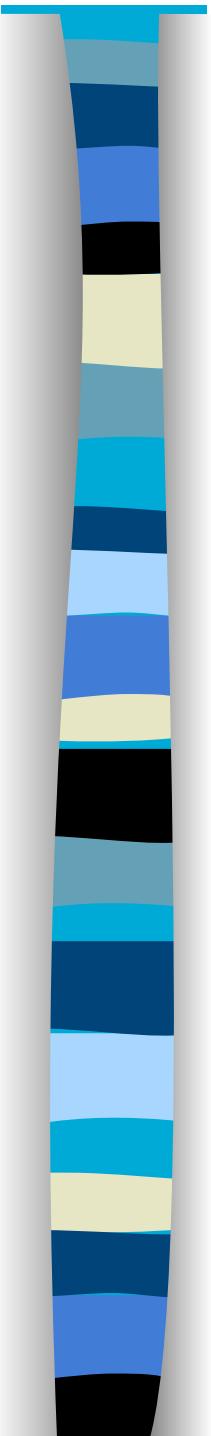


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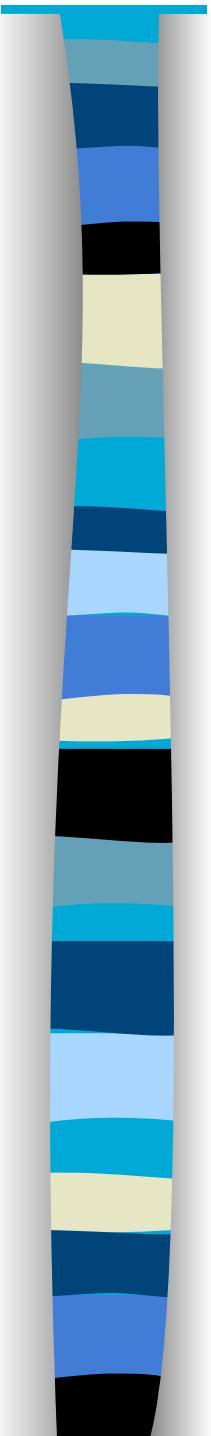


# Types

A lifelong disability caused by mental or physical impairments that manifested before the age of 18 is called:

- A. Congenital disability
- B. Developmental delay
- C. Mental health disability
- D. Developmental disability

Q

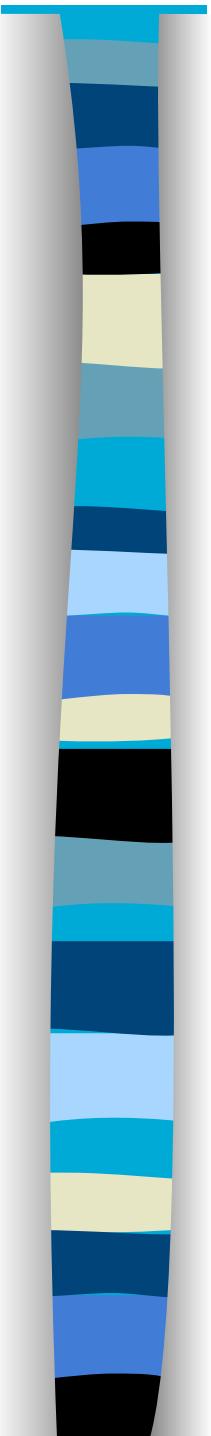


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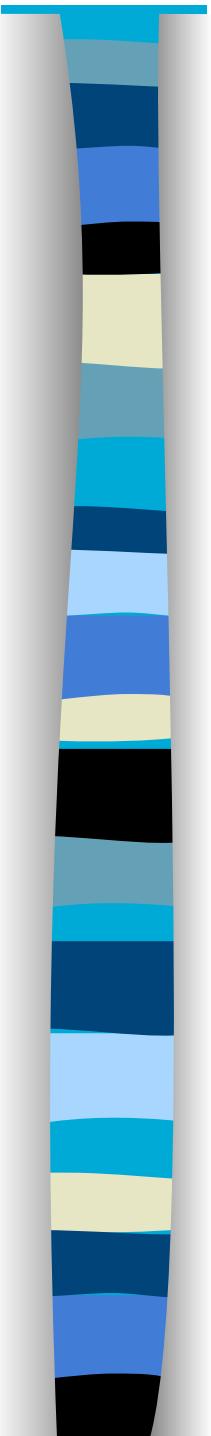


# Types

Feelings of unsteadiness, or sensations like spinning or floating indicate:

- A. A mental health disability
- B. An intellectual disability
- C. A hearing disorder
- D. A balance disorder

Q

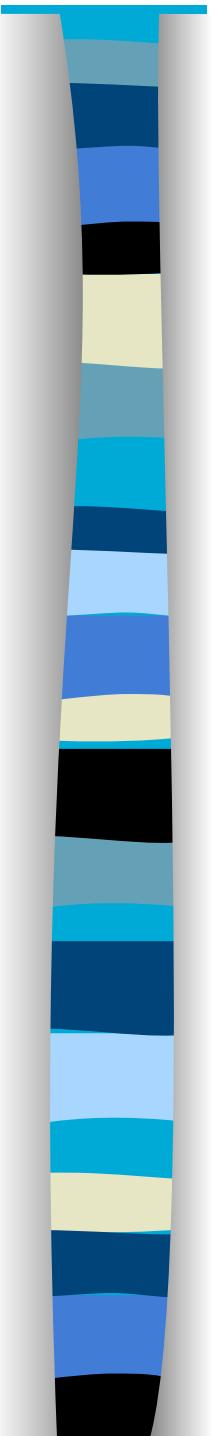


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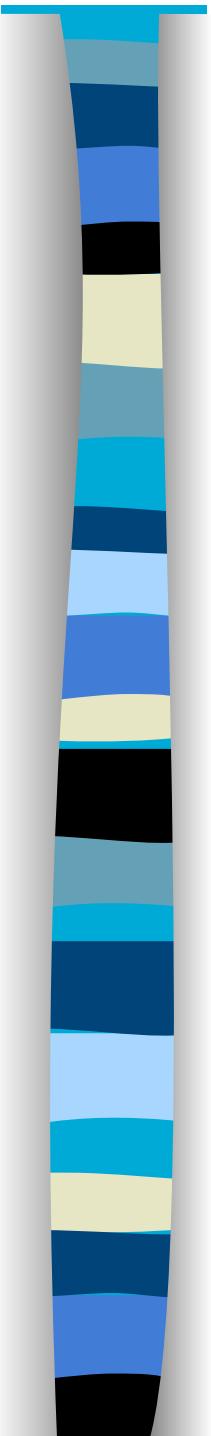


# Types

Any disability that affects mental processes and cognitive ability is broadly classified as a(n):

- A. Physical disability
- B. Intellectual disability
- C. Sensory disability
- D. Mental health disability

Q



# Types

Any disability that affects mental processes and cognitive ability is broadly classified as a(n):

- A. Physical disability
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# Types

A visual impairment is considered a:

- A. Mental health disability
- B. Intellectual disability
- C. Congenital disability
- D. Sensory disability

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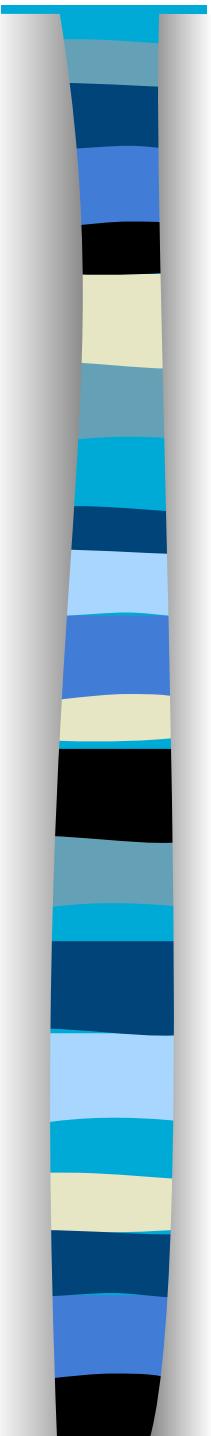
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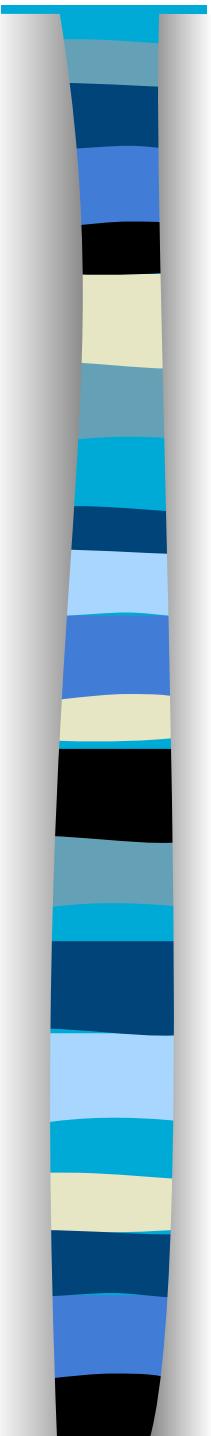


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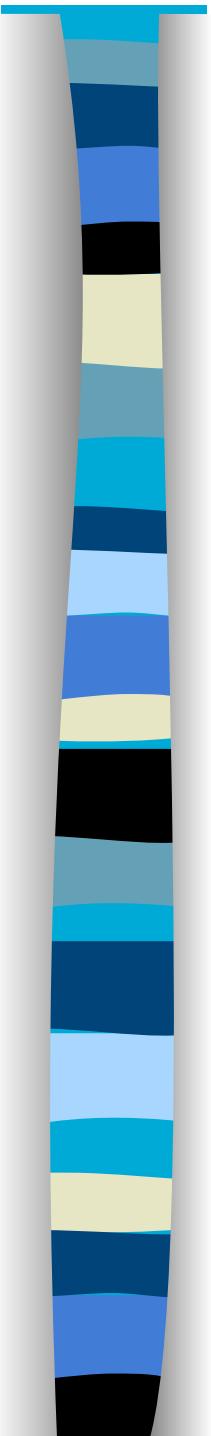


# Types

An amputation of an extremity is classified as:

- A. A physical disability
- B. A sensory disability
- C. An intellectual disability
- D. A mental health disability

Q

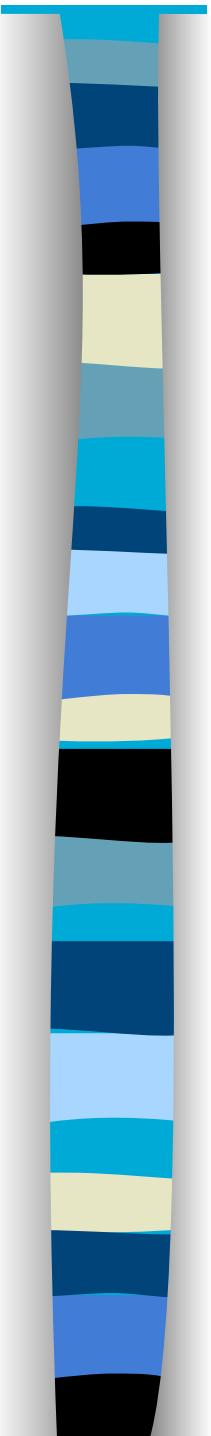


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# Types

A pulmonary disease that causes an impairment is classified as:

- A. A mental health disability
- B. A sensory disability
- C. An intellectual disability
- D. A physical disability

Q

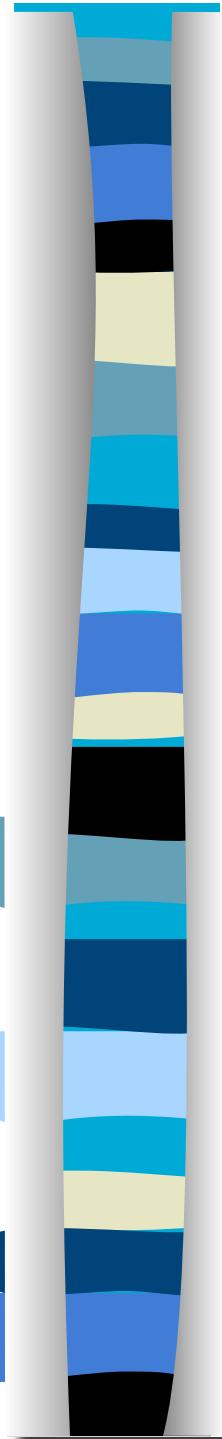
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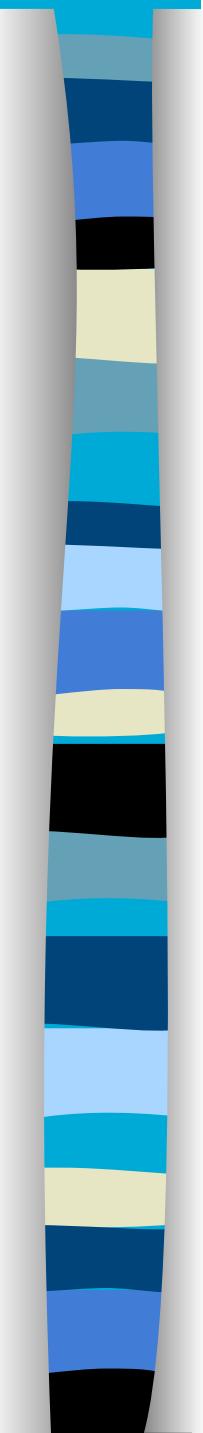




# ABMP Exam Coach

Special Populations:  
Clients Disabilities

Best Practices

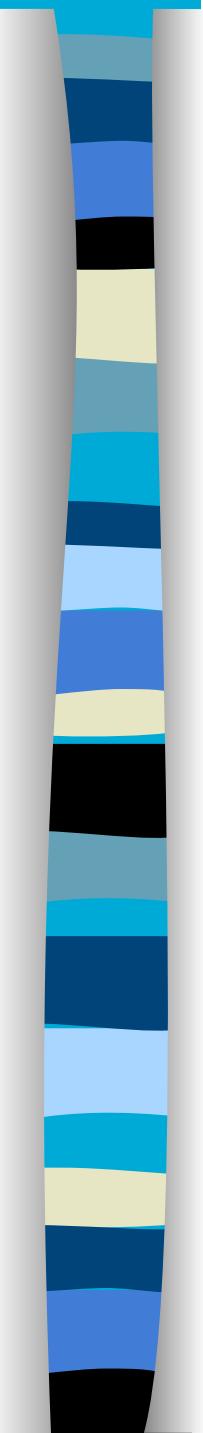


# Best Practices

People-first language:

- A. Ignores that a person has a disability
- B. Places the person equal to the disability
- C. Places the person before the disability
- D. Places the person after the disability

Q



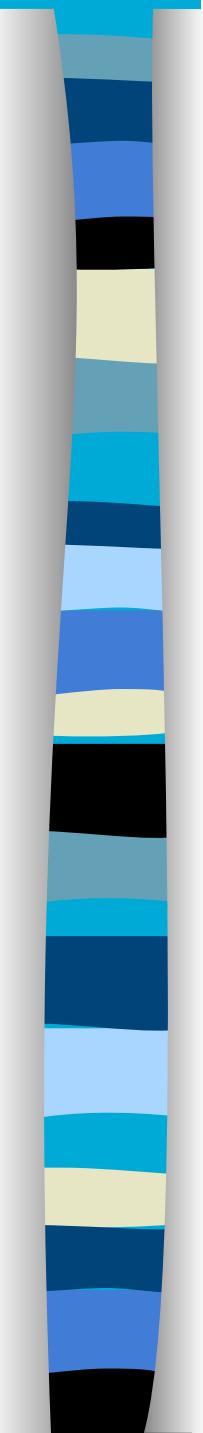
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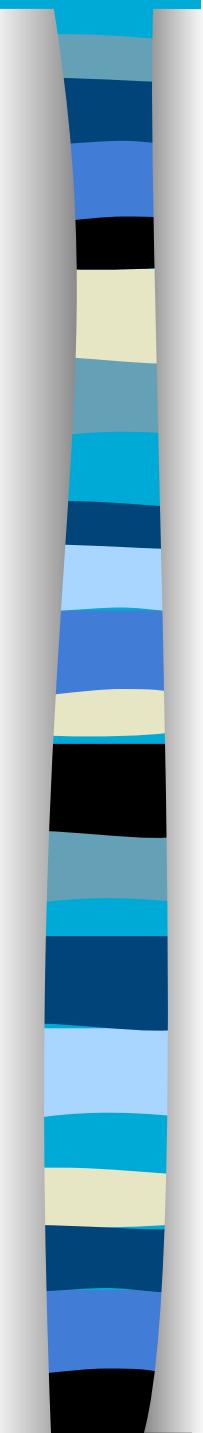


# Best Practices

Societal or personal modifications that help people broaden the accessibility of places and things are called:

- A. Assertive (or adaptive) technology
- B. Wheelchair accessible
- C. People-first technology
- D. Special needs technology

Q

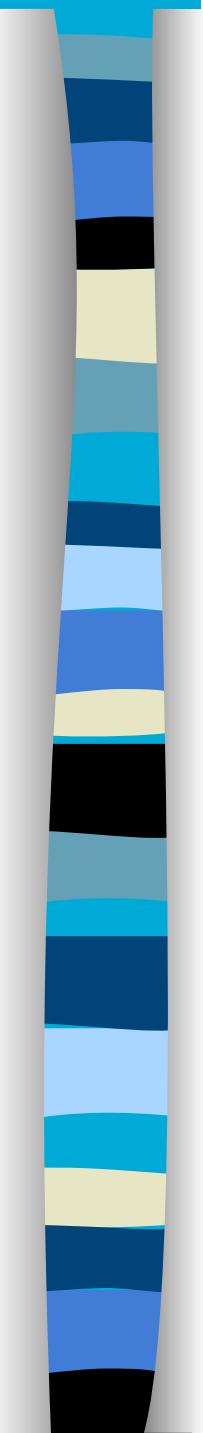


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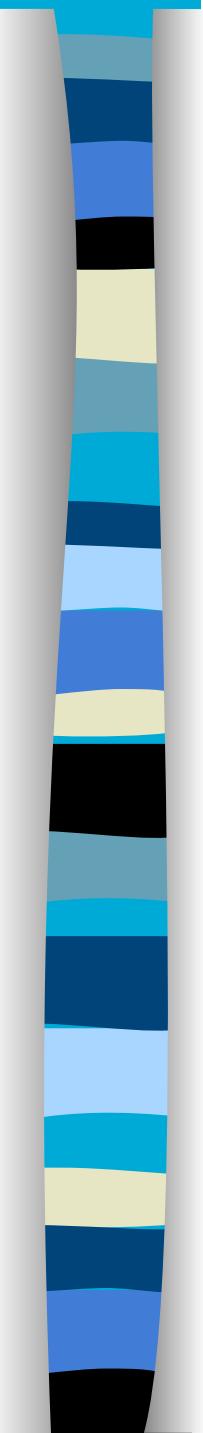


# Best Practices

The goal of people-first language is to:

- A. Recognize that people can overcome their disabilities
- B. Recognize that people are equal to their disabilities
- C. Ignore that a person has a disability
- D. Raise awareness and understanding



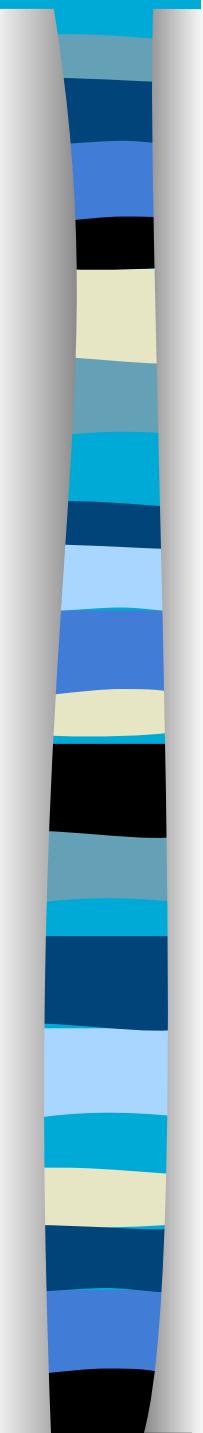


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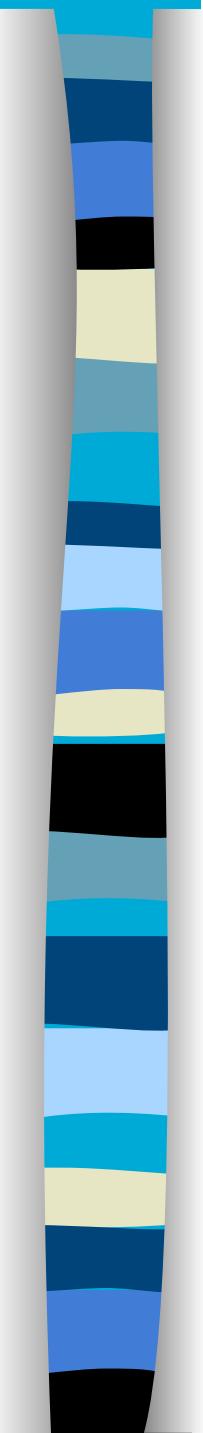


# Best Practices

When working with clients with disabilities, it is appropriate to:

- A. Speak directly to an interpreter when conducting the health intake for a person with a hearing impairment if you have difficulty communicating
- B. Place a hand on the shoulder of a client with a hearing impairment to get his or her attention
- C. Place the personal items of a person with a visual impairment (like clothing) out of the way and in a safe place
- D. Speak in a loud voice to a person with a visual impairment to get his or her attention



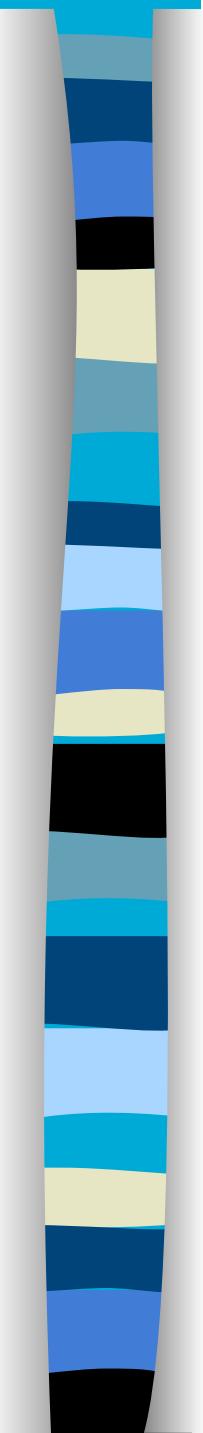


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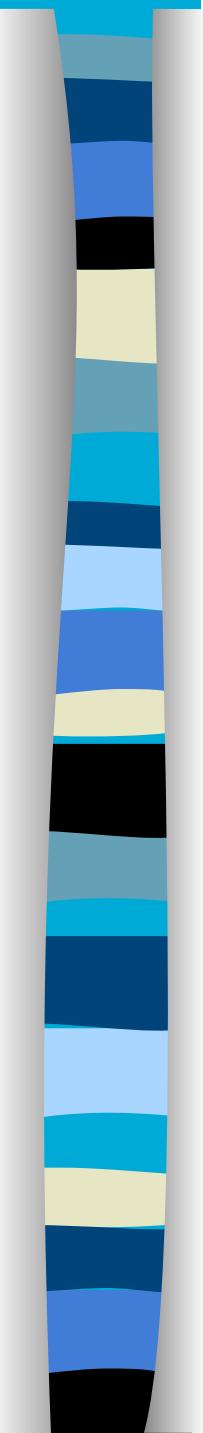


# Best Practices

When working with clients with disabilities, it is appropriate to:

- A. Make every effort to assist the client without making reference to the disability or without asking the client first
- B. Take hold of a person with a visual impairment and guide him or her physically
- C. Ask the client directly and respectfully what type of assistance he or she might need
- D. Pet a service dog and give it water and a treat

Q

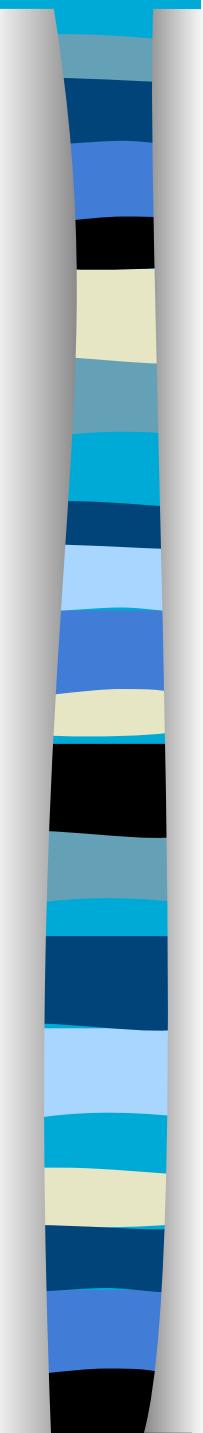


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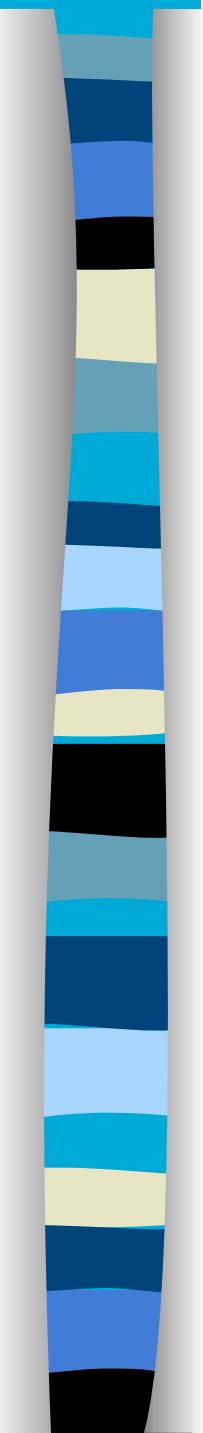


# Best Practices

The preferred expression in people-first language is:

- A. Person with cerebral palsy
- B. Spastic person
- C. Palsied person
- D. CP person

Q

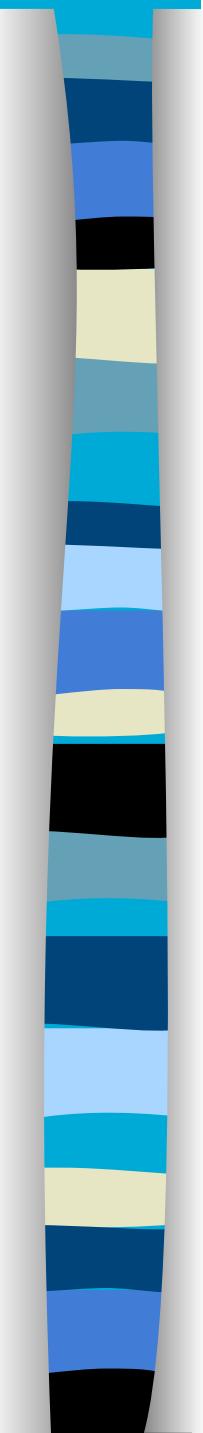


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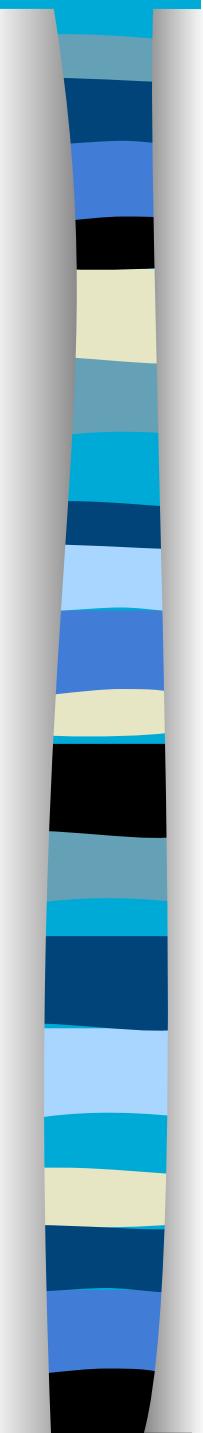


# Best Practices

The preferred expression in people-first language is:

- A. Functionally impaired child
- B. Disabled child
- C. Handicapped child
- D. Child with a disability

Q

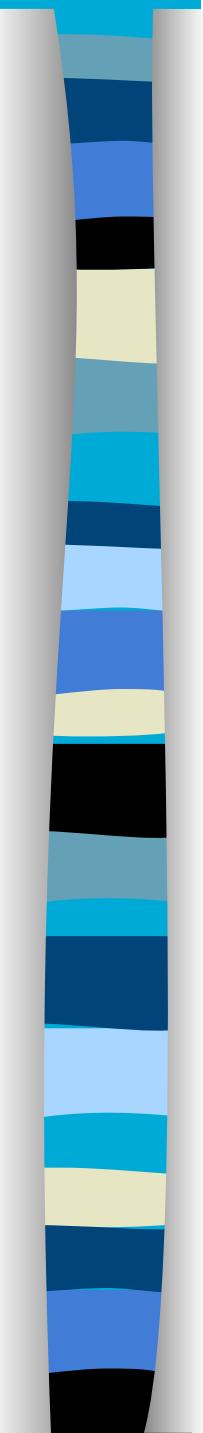


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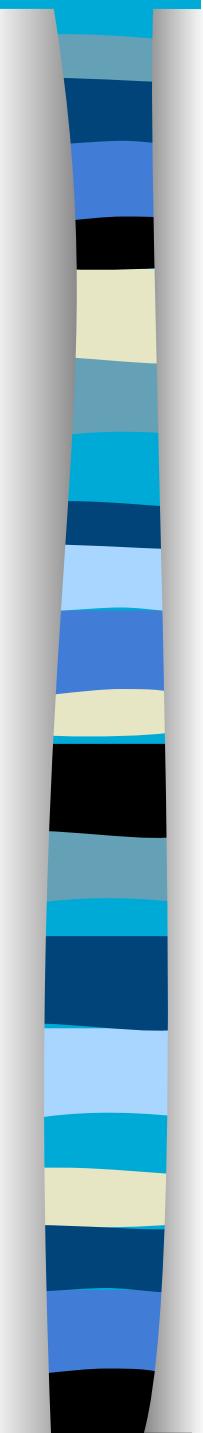


# Best Practices

The preferred expression in people-first language is:

- A. A child with a congenital disability
- B. Congenital defective child
- C. Birth defect
- D. Birth defective child

Q

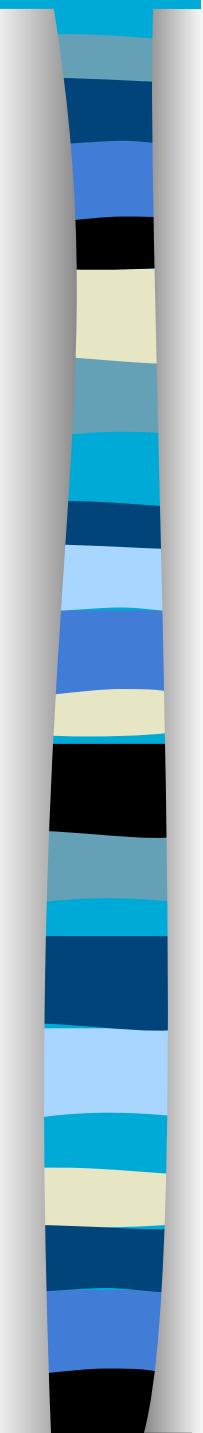


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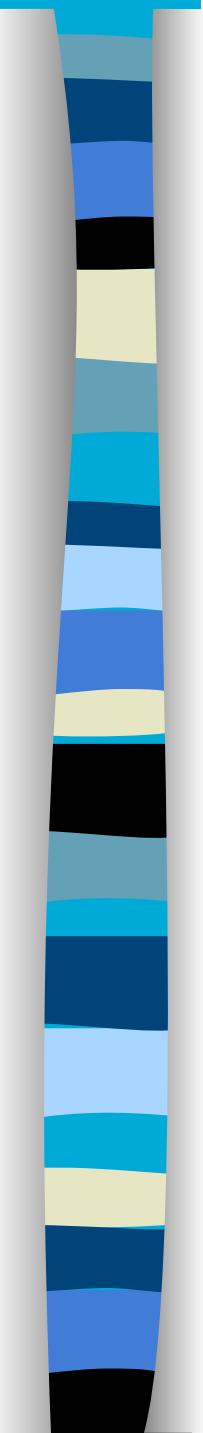


# Best Practices

If a client has a limb amputation, it is:

- A. Safe and beneficial to massage the entire remainder of the limb with the client's permission
- B. Safe so long as only soft gliding strokes are applied to the limb with the client's permission
- C. Contraindicated for massage
- D. A local contraindication for massage

Q

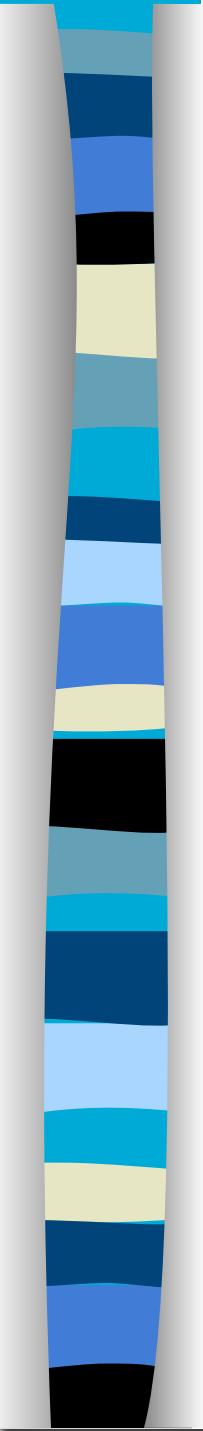


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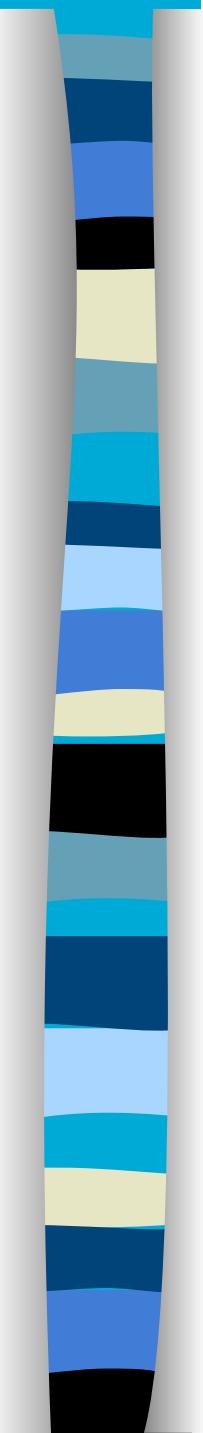


# Best Practices

If a client is using a wheelchair, the therapist should:

- A. Push the wheelchair for the client so that the client doesn't need to ask for help
- B. Avoid leaning on the wheelchair and invading a person's personal space
- C. Lean on the wheelchair to demonstrate friendliness
- D. Push the wheelchair out of the session room once the client is on the table

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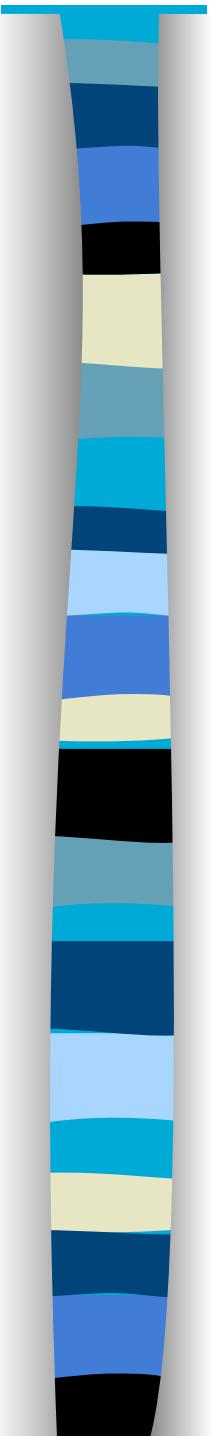




# ABMP Exam Coach

Special Populations:  
Clients who are Disabled

Functional Impairments

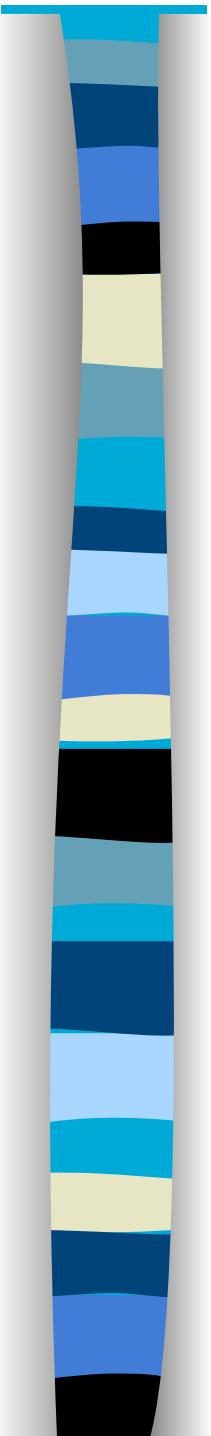


# Functional Impairments

In a medical sense, a problem in body structure or function that impacts a person's ability to execute a task or an action is called a(n):

- A. Drawback
- B. Limitation
- C. Disadvantage
- D. Impairment

Q

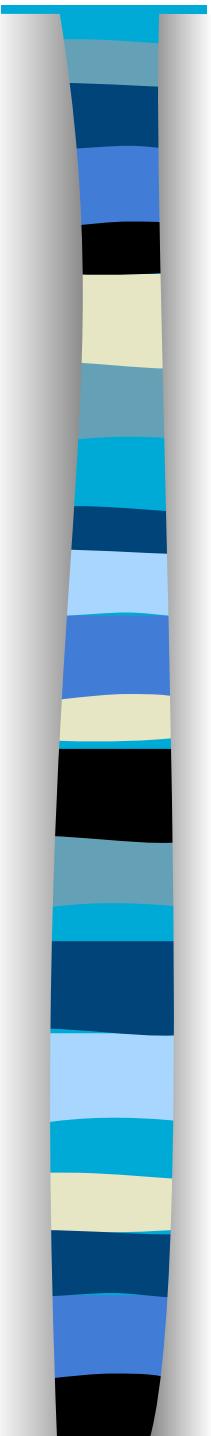


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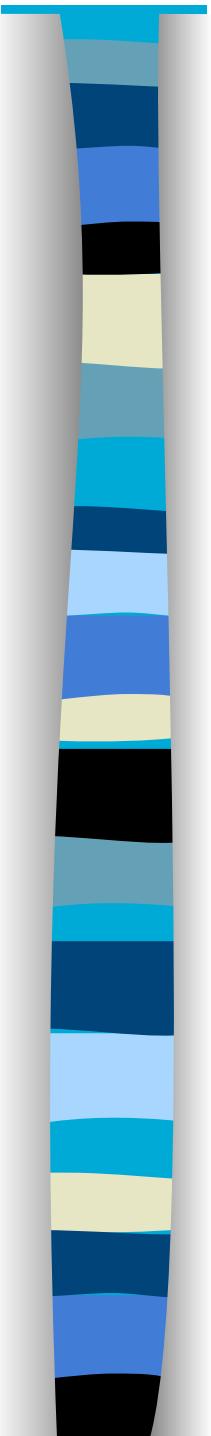


# Functional Impairments

One cause of functional impairments related to medical disability is:

- A. Urinary issues
- B. Food allergies
- C. An accident
- D. Sleeping patterns

Q

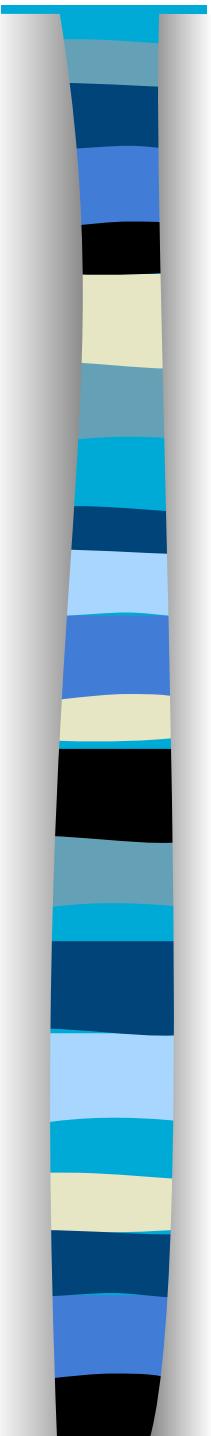


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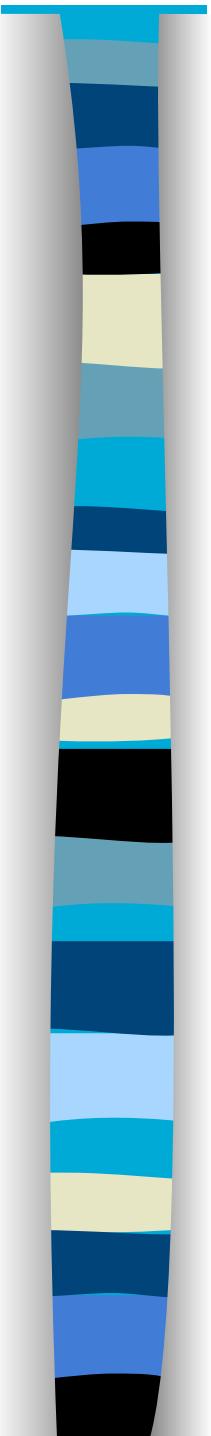


# Functional Impairments

The loss of muscle function in one or more muscles is called:

- A. Paralysis
- B. Prosthesis
- C. Neuralgia
- D. Autism

Q

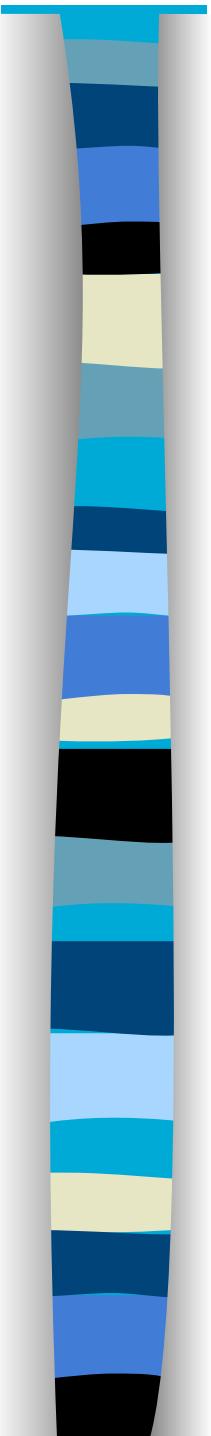


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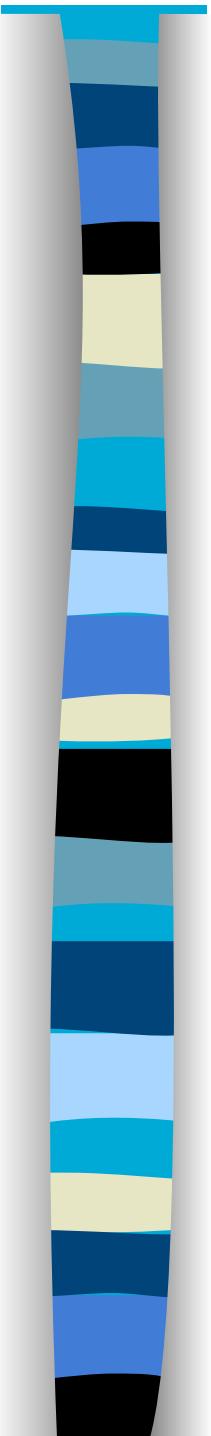


# Functional Impairments

In a medical sense, a functional impairment might indicate:

- A. Limits to a person's liquid intake
- B. Limits to a person's mobility
- C. Limits to a person's sleep length
- D. Limits to a person's diet

Q

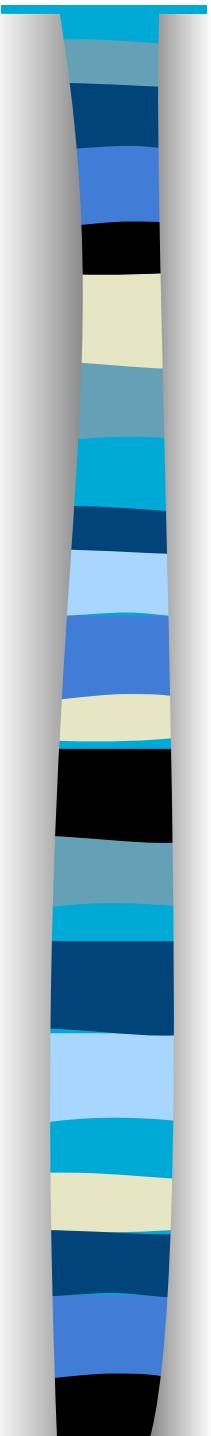


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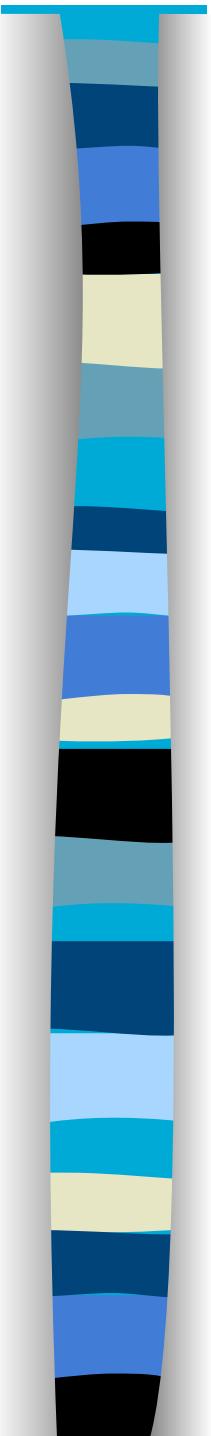


# Functional Impairments

One cause of functional impairments related to medical disability is:

- A. Low thyroid
- B. Genetics
- C. High estrogen
- D. High cortisol

Q

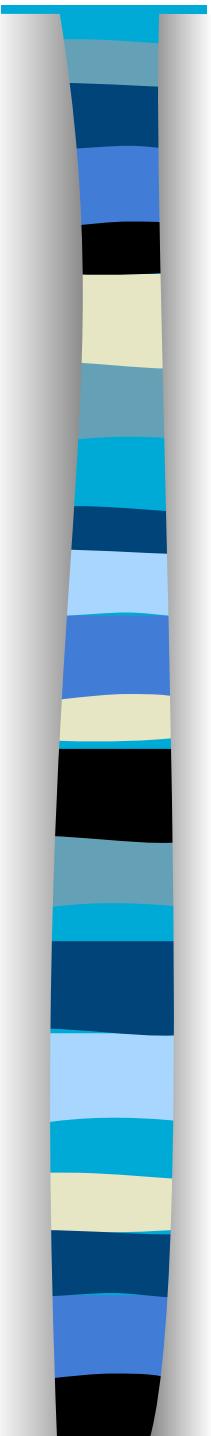


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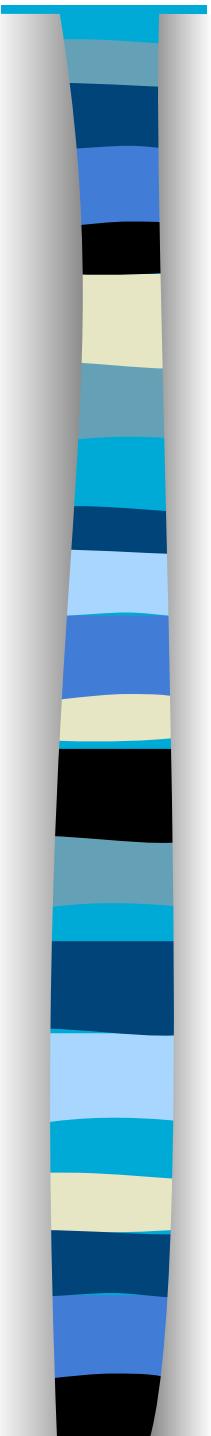


# Functional Impairments

In a medical sense, a functional impairment might indicate:

- A. Liver issues
- B. Limits to a person's genetics
- C. Limits to a person's hearing
- D. Food allergies

Q

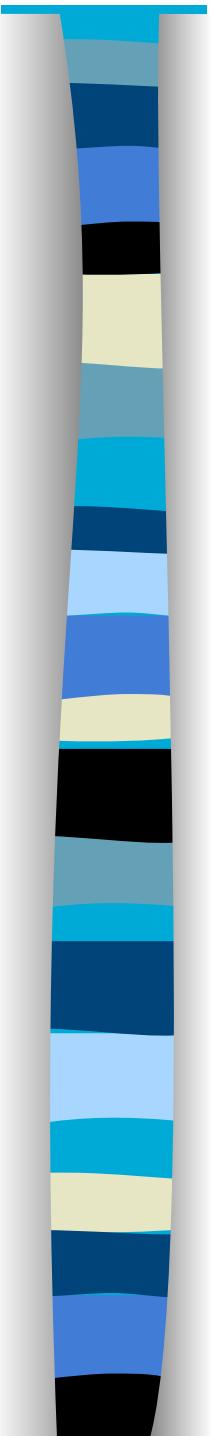


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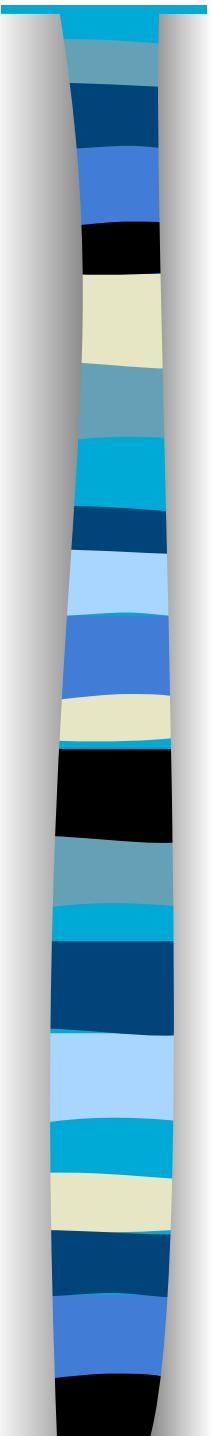


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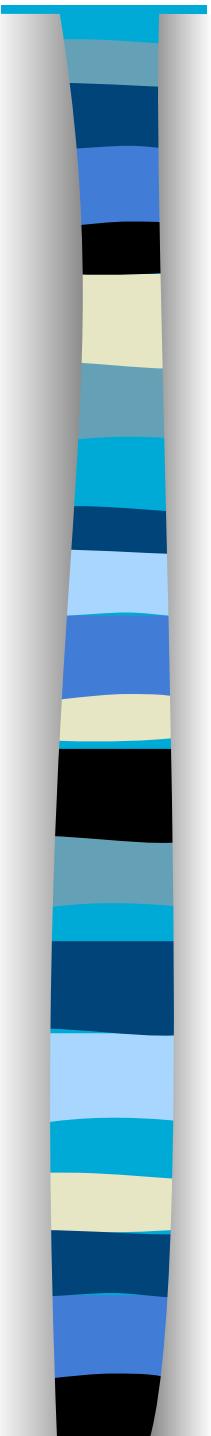


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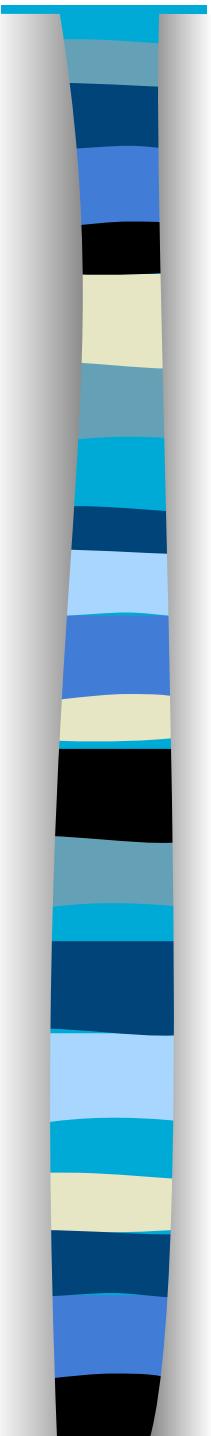


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In a medical sense, a functional impairment might indicate:

- A. Food allergies
- B. Dietary restrictions
- C. Liver issues
- D. Limits to a person's mental capacity





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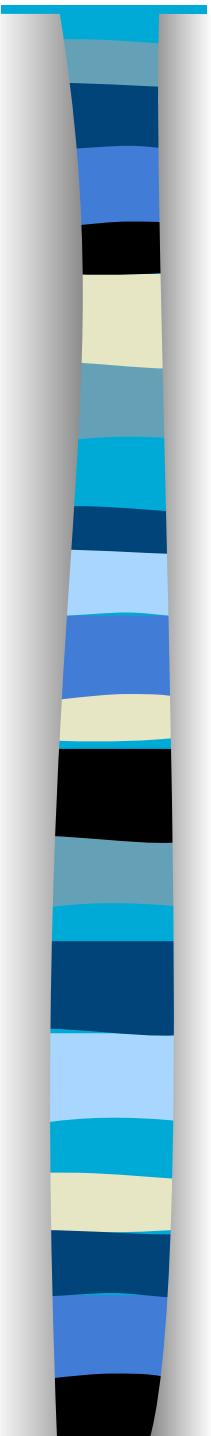




# ABMP Exam Coach

Special Populations:  
Clients with Disabilities

Neurological Impairments

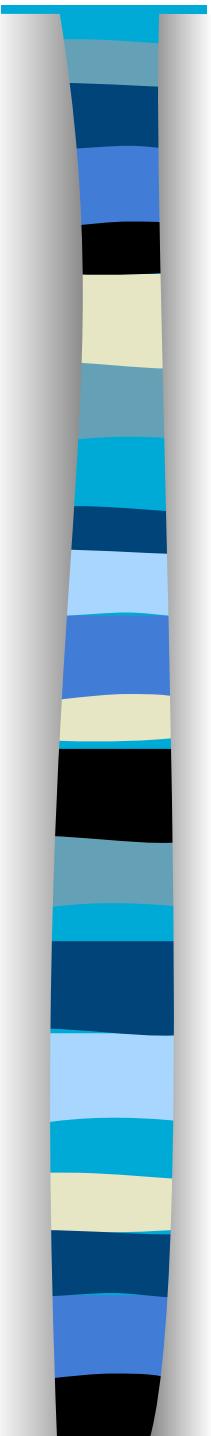


# Neurological Impairments

Neurological impairments that affect the brain's ability to receive, process, store, and respond to information are called:

- A. Developmental delays
- B. Learning disabilities
- C. Sensory disabilities
- D. Developmental disabilities

Q

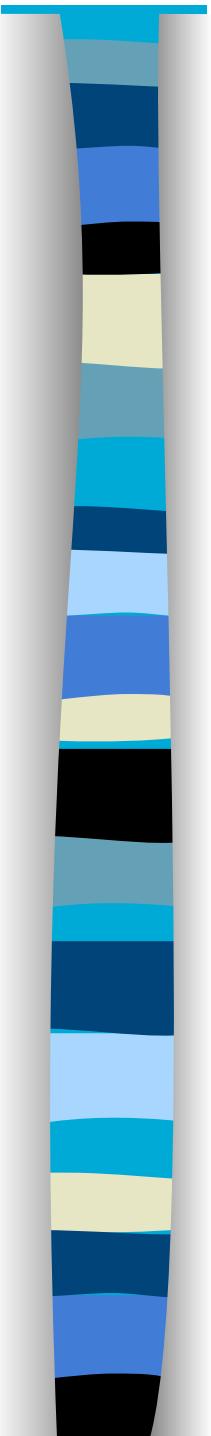


# Neurological Impairments

Neurological impairments that affect the brain's ability to receive, process, store, and respond to information are called:

- A. Developmental delays
- B. Learning disabilities**
- C. Sensory disabilities
- D. Developmental disabilities

A

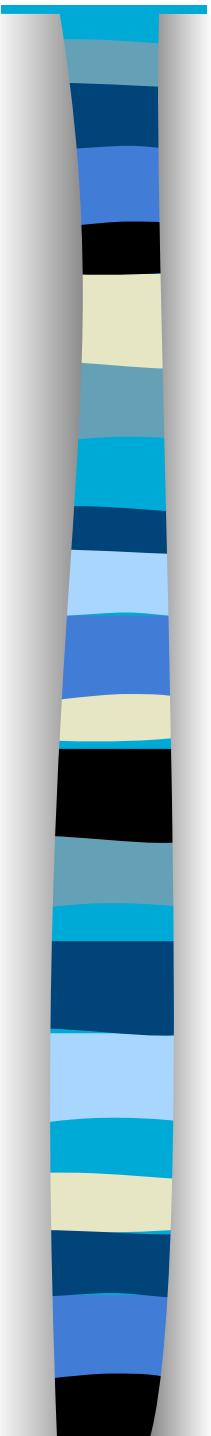


# Neurological Impairments

Devices that help people with disabilities overcome impairments and broaden the accessibility of places or things are called:

- A. Assertive (or adaptive) technology
- B. Handicapped parking
- C. People-first technology
- D. Handicapped hotel room

Q



# Neurological Impairments

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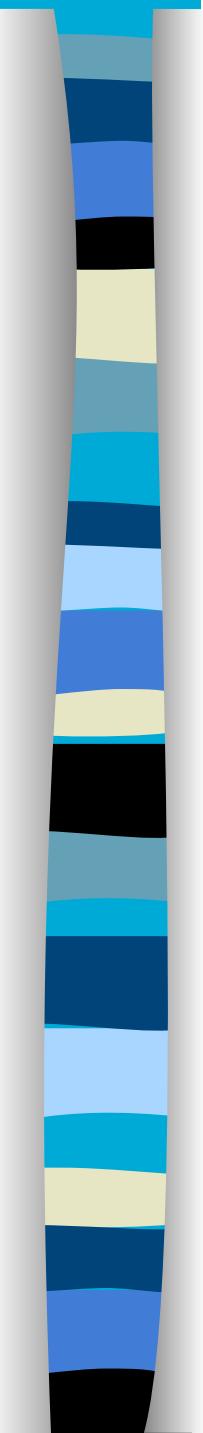
- A. Assertive (or adaptive) technology
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A









## 86a MBLEx Prep

### ABMP Exam Coach

#### Special Populations

- Clients over 55
- Clients who are Obese
- Clients who are Children
- Clients who are pregnant
- Clients who are athletes
- Clients at the End of Life
- Clients with Disabilities