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**Trainers**

# GPTS

*NASM Group Training Specialist*



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**Question:** 68

What type of instructor promotes dependence, intimidates participants, presents unattainable goals, and focuses on the “quick fix” (other than a soon-to-be-fired-instructor)?

- A. The facility-centered instructor
- B. The participant-centered instructor
- C. The goal-centered instructor
- D. The teacher-centered instructor

**Answer:** D

The teacher-centered instructor promotes dependence in class members, tries to win influence through intimidation, creates an unrealistic picture and presents easy answers or “quick fixes”. In contrast, a patient-centered instructor provides consistent encouragement, has knowledge of attainable goals, fosters independence in participants and is centered on reality.

**Question:** 69

The American College of Sports Medicine (ACSM) recently released a document entitled “Quantity and Quality of Exercise for Developing and Maintaining Cardio respiratory, Musculoskeletal, and Neuromotor Fitness in Apparently Healthy Adults: Guidance for Prescribing Exercise”. This paper gave a definitive answer to the age-old **Question:**

- A. Which disciplines are legally permitted to work with clients?
- B. How much exercise is actually enough exercise?

- C. What is the minimum age at which children should be permitted to participate in weight training?
- D. What are the gold-standard methods for adapting any exercise for the client with a disability?

**Answer: B**

The American College of Sports Medicine 2011 position paper remains in sync with the landmark 2008 report “Physical Activity Guidelines for Americans” by answering the perennial **Question:** How much exercise is enough? The document provides exercise prescription recommendations for the apparently healthy adult.

**Question:** 70

One of the most noticeable physical differences between men and women is the presence - or absence -- of body fat. Because men do not need nearly the quantity of essential body fat, their total amount of fat is often much lower than their female counterparts. What is the ESSENTIAL level of body fat for women?

- A. 2-5%
- B. 6-9%
- C. 10-13%
- D. 12-16%

**Answer: D**

Women need approximately 10-13% body fat to live. Keep in mind that essential body fat is different from the recommended minimums suggested to women; essential body fat is the amount of fat thought to be essential to the preservation of life. This level provides the minimum fat needed to properly cushion organs, coat nerves and provide immediate energy stores.

**Question:** 71

The efficiency of the human heart is a beautiful thing. All four chambers work in a beautiful, synchronized effort to do one thing well: push blood. When disease compromises the heart’s ability to function, the result is often a reduction in

“ejection fraction” (EF) or the percentage of the end diastolic volume ejected with each contraction. What is a normal value for EF at rest?

- A. 50-60%
- B. 60-70%
- C. 60-80%
- D. 70-80%

**Answer:** A

Ejection fraction is basically a measure of efficiency: how much blood is pushed and how much is left lingering in the heart? At rest, the normal human heart is not nearly as efficient as during exercise; only 50-60% of the end diastolic volume is pushed out of the heart with each contraction.

**Question:** 72

One of the methods that fitness facilities use to reduce risk is to make use of screening questionnaires, especially for members who are at high risk for cardiovascular disease. Which of the following is an example of such a screening tool?

- A. Physical Activity Readiness Questionnaire
- B. Functional Independence Measure
- C. Short Form 36 Health Survey
- D. Informed Consent Form

**Answer:** A

The Physical Activity Readiness Questionnaire (PAR-Q) is a popular screening tool used by fitness professionals to assess an individual's readiness for exercise. This tool can point-out at-risk individuals who should be referred to their physicians or physical therapists prior to initiation of an exercise program. The Functional Independence Measure (FIM) and the Short Form 36 are both examples of assessments tools used in the rehabilitation field.

**Question:** 73

Departing the club after teaching a particularly stellar Weight Training class, you notice a woman lying at the bottom of the stairs, moaning and clutching her ankle. As the first responder on the scene, you assess the situation and note the following signs and symptoms in the victim's ankle: significant swelling, bruising, an inability to weight bear, and a difference in angle and positioning from the other side. Which of the following is MOST likely to be the cause?

- A. Bone spur
- B. Strain
- C. Fracture
- D. Tear of cartilage

**Answer: C**

Fractures are serious events, both because of the damage to the bone itself and because of the cascade of events that occur as the body responds to the injury. One of the key signs of fracture is a deformity or angulation, especially notable when comparing from side to side. Severe ligamentous tears (not offered as an option in the answers) can cause similar symptoms to a fracture, including: swelling, bruising, an inability to bear weight, an audible noise at the time of injury, severe pain, severe weakness and loss of function. Massive ligamentous tears can even cause joint deformity. Thus, it is essential that the victim seeks medical care to determine the nature of the underlying injury.

**Question: 74**

In an emergency situation, skin color can provide excellent insight into a victim's health status. Grayish, pale skin is MOST indicative of which of the following:

- A. Heat exhaustion
- B. Liver disease
- C. Poor circulation
- D. Head trauma

**Answer: C**

Grayish, pale skin is often an indication of poor circulation. During emergency situations, once the victim is stable, the responder should do a secondary assessment which includes an examination of skin color. Warm skin with pinkish

tones tells a better story about the victim's status; it tends to show that both circulation and oxygenation are occurring.

**Question:** 75

Under normal circumstances, brain death will occur in the absence of oxygen in:

- A. 3-4 minutes
- B. 4-6 minutes
- C. 7-10 minutes
- D. 10-12 minutes

**Answer:** B

On average, it takes the Emergency Medical Services (EMS) 7-10 minutes to arrive at the scene which is particularly problematic as brain death will occur in 4-6 minutes in the absence of oxygen. Under unusual circumstances, such as with immersion in cold water, brain damage can be delayed because of the retardation of cellular processes.



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