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38	A	B	C	D	E
39	A	B	C	D	E

PRACTICE QUESTIONS

Sharjah Health Authority (SHA)

POSTE

Osteopathy

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for Sharjah Health Authority (SHA) **POSTE**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **POSTE**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1

MULTIPLE CHOICE

Which of the following statements accurately describe the core osteopathic principles as articulated by Andrew Taylor Still? (Choose two.)

- ☒ **A** The body is a unit and the person is a unit of body, mind, and spirit.
- ☐ **B** Disease is caused solely by external pathogens independent of host factors.
- ☐ **C** The body possesses self-regulatory and self-healing mechanisms.
- ☒ **D** Structure and function are reciprocally interrelated.

ANSWER A - D

WHY Two of Still's foundational principles are the unity of body, mind, and spirit and the reciprocal relationship between structure and function. Self-healing is also a core principle (C is also correct osteopathic philosophy, but the question asks for two of the listed options that are recognized principles). The statement in B contradicts osteopathic philosophy because Still emphasized the body's integral role in health.

QUESTION 2

MULTIPLE CHOICE

Which of the following are considered direct osteopathic manipulative treatment techniques? (Choose two.)

- ☒ **A** Myofascial release
- ☐ **B** Indirect balancing of ligamentous tension
- ☒ **C** High-velocity, low-amplitude (HVLA) thrust
- ☐ **D** Cranial osteopathy in the balanced membranous tension model

ANSWER A - C

WHY Direct techniques (such as myofascial release when engaging the barrier and HVLA thrust) move tissues toward or through the restrictive barrier using an activating force. Indirect techniques (B and D) move tissues away from the barrier toward the position of ease or balanced tension.

QUESTION 3

TRUE FALSE

High-velocity, low-amplitude (HVLA) technique is absolutely contraindicated in a region with suspected vertebral artery dissection.

☒ **A** True☐ **B** False**ANSWER A**

WHY True. HVLA to the cervical spine is absolutely contraindicated when there is suspected or confirmed vertebral artery dissection because the technique could displace a thrombus or worsen the vascular injury, with risk of stroke or death. Safer indirect or direct myofascial techniques, or referral, are indicated instead.

QUESTION 4

SINGLE CHOICE

Which muscle is primarily responsible for abduction of the arm in the range of approximately 15 to 90 degrees?

☐ **A** Supraspinatus☒ **B** Deltoid☐ **C** Trapezius☐ **D** Serratus anterior**ANSWER B**

WHY The supraspinatus initiates abduction for the first 15 degrees. From roughly 15 to 90 degrees, the middle fibers of the deltoid are the prime movers for arm abduction. The trapezius and serratus anterior act on the scapula, not directly on glenohumeral abduction in this range.

QUESTION 5

SINGLE CHOICE

A patient presents with a right-on-right sacral torsion. Which of the following findings is most consistent with this diagnosis?

- ☐ A Right sulcus deep, right ILA posterior, lumbosacral junction neutral.
- ☐ B Left sulcus deep, left ILA posterior, lumbosacral junction neutral.
- ☒ C Right sulcus deep, left ILA posterior, lumbosacral junction rotated right (spring positive on the left).
- ☐ D Right sulcus deep, right ILA posterior, lumbosacral junction rotated left (spring positive on the left).

ANSWER C

WHY A right-on-right sacral torsion is named for the direction of sacral rotation on the right oblique axis. It presents with a deep right sulcus, a posterior (deep) left ILA, and the lumbosacral junction rotated right (i.e., springing positive, indicating restriction, on the left). Option D describes a right-on-left (forward) torsion. Options A and B are incomplete positional descriptions lacking the lumbosacral rotation finding.

QUESTION 6

SINGLE CHOICE

The osteopathic diagnostic framework for somatic dysfunction is commonly remembered by the mnemonic TART. The letters stand for:

- ☒ A Tenderness, Asymmetry, Range of motion change, Tissue texture abnormality
- ☐ B Tenderness, Atrophy, Rigidity, Tautness
- ☐ C Tone, Alignment, Resistance, Temperature
- ☐ D Trigger points, Adhesions, Restriction, Tendonitis

ANSWER A

WHY TART stands for Tissue texture abnormality, Asymmetry, Restriction of motion, and Tenderness. These are the four diagnostic criteria for identifying somatic dysfunction used in osteopathic clinical practice.

QUESTION 7 SINGLE CHOICE

In the primary respiratory mechanism (PRM) as classically described by William Garner Sutherland, DO, the inherent motility of the central nervous system is referred to as:

- ☐ A The cranial rhythmic impulse
- ☐ B The fluctuation of the cerebrospinal fluid
- ☒ C The inherent motility of the brain and spinal cord
- ☐ D The reciprocal tension membrane

ANSWER C

WHY Sutherland described five components of the PRM: inherent motility of the brain and spinal cord; fluctuation of the cerebrospinal fluid; mobility of the intracranial and intraspinal membranes (reciprocal tension membrane); articular mobility of the cranial bones; and mobility of the sacrum between the ilia. The cranial rhythmic impulse (CRI) is the palpable rate, distinct from the motility itself.

QUESTION 8 SINGLE CHOICE

When documenting a somatic dysfunction, the osteopathic medical record conventionally reports findings using which positional notation?

- ☐ A Free-form narrative without standardized codes.
- ☐ B The 1997 American Hospital Association 'Palmer' system.
- ☒ C The 1994 Jerabek/Johnston system describing position relative to neutral.
- ☐ D A WHO ICD-10 anatomical code only.

ANSWER C

WHY Osteopathic structural examination documentation conventionally uses the Jerabek/Johnston (or similar region-specific positional) system to describe findings of somatic dysfunction in terms of the vertebra's position relative to neutral (e.g., L4 F Rr Sr), along with associated tissue texture, asymmetry, restriction, and tenderness (TART).

QUESTION 9

SINGLE CHOICE

Which of the following conditions is an absolute contraindication to lumbar high-velocity, low-amplitude (HVLA) technique?

- ☐ A Mechanical low back pain without red flags.
- ☒ B Acute cauda equina syndrome.
- ☐ C Mild sacroiliac joint restriction.
- ☐ D Chronic non-specific lumbar strain.

ANSWER B

WHY Acute cauda equina syndrome is a neurosurgical emergency and an absolute contraindication to lumbar HVLA; manipulation could worsen neurological compromise. Mechanical low back pain without red flags, mild SI joint restriction, and chronic lumbar strain are common indications where HVLA may be appropriately considered after screening.