Flex Therapist CEUs

Cervical Radiculopathy - Clinical Application of Traction and Exercises

1. What is the most common age group for CR to occur?

A. 20s

B. 30s

C. 70s

D. 50s

2. What is a cause of CR?

- A. Migraine
- B. Spinal nerve compression
- C. Osteoporsis
- D. Spinal stability

3. What is not a sign of CR?

- A. Headache
- B. Numbness in hand
- C. Pain in mid-back
- D. Aching in cervical spine

4. What is the most common symptom of CR?

- A. Arm pain
- B. Sensation deficit
- C. Reflex deficit
- D. Weakness

5. Which is not a prognostic factor for developing CR?

- A. Other musculoskeletal disorders
- B. Passive coping strategy
- C. Having an office job
- D. Psychological distress

6. Where will C5 radiculopathy produce referral pain?

- A. Neck
- B. Fingers
- C. Low back
- D. Occiput

7. Where would expected weakness occur with a C7 radiculopathy?

- A. Hypothenar muscles
- B. Biceps brachii
- C. Wrist flexors
- D. Wrist extensors

8. Which is not a diagnostic strategy for CR?

- A. Xray
- B. MRI
- C. CT
- D. Nerve conduction study

9. What percentage of the population with or without symptoms have evidence of cervical spine degeneration?

- A. 80%
- B. 20%
- C. 50%
- D. 70%

10. Which imaging study is most effective for diagnosis of CR?

- A. MRI
- B. CT myelography
- C. NCS
- D. EMG

11. What pathology is CT myelography most useful in detecting?

- A. Cervical radiculopathy
- B. Spinal pathology
- C. Spinal nerve impingement
- D. Infection

12. What contributes to complex CR?

- A. Abscess
- B. Pain in thumb
- C. Sensation loss in lateral forearm
- D. No improvement in one week

13. What will an EMG study reveal?

- A. Sensation deficits
- B. Weakness in myotome pattern
- C. Pain in upper extremity
- D. Weakness in lower extremity

14. Which is not a standard part of a physical therapy assessment for CR?

- A. Posture
- B. Thoracic mobility
- C. Abodominal strength
- D. ROM in upper extremities

15. How many degrees should the cervical spine flex normally?

- A. 20 degrees
- B. 40 degrees
- C. 60 degrees
- D. 80 degrees

16. What spinal segments allow most of the rotation of the cervical spine?

- A. C4-5
- B. C2-3
- C. C1-2
- D. C6-7

17. What can a clinician expect if a patient has active shoulder flexion to 60 but passive to 170 degrees?

- A. Joint restriction
- B. Muscle length issue
- C. Neoplasm
- D. Thoracic outlet syndrome

18. Which dermatome is affected with parasthesia in the upper clavicle?

- A. C3
- B. C5
- C. C2
- D. C4

19. The tendon of which muscle should be tested for deep tendon reflex to examin C6 nerve root?

- A. Flexor pollicus longus
- B. Brachioradialis
- C. Triceps brachii
- D. Anterior deltoid

20. What does the Spurling's test detect?

- A. Nerve root compression
- B. Migraine
- C. Thoracic outlet syndrome
- D. Decreased thoracic extension

21. What is not a test part of the CPR for cervical radiculopathy?

- A. Distraction
- B. Spurling's
- C. Rotation more than 60 degrees
- D. ULTTa

22. What should a clinician examine if suspecting cervical myelopathy?

- A. Blood flow to cervical spine
- B. Babinski reflex
- C. Nerve conduction study
- D. Lower extremity strength

23. What is a common pathology causing CR?

- A. Tumor
- **B.** Infection
- C. Disc herniation
- D. Trauma

24. What is the most common operation for CR?

- A. Anterior cervical discectomy and fusion
- B. Cervical disc replacment
- C. Minimally invasive posterior cervical foraminotomy
- D. Laminectomy

25. When is a cervical collar most useful?

- A. 1 year after injury
- B. 4 days after pain began
- C. For mild pain
- D. One month after pain

26. Which medication is not supported in management of CR?

- A. NSAID
- B. Epidural steroid
- C. Opioid
- D. Tricyclic antidepressant

27. Which type of traction is most supported in literature for longer lasting treatment of CR?

- A. Mechanical
- B. Over the door
- C. Prone
- D. Manual

28. When combined with other interventions which treatment is proven most effective for CR?

- A. Manipulation
- B. Steroid injection
- C. Surgery
- D. Exercise

29. Which muscles are important to strengthen when treating CR?

- A. Latissimus dorsi
- B. Deep neck flexors
- C. Pectoralis major
- D. Levator scapulae

30. Which outcome measure should be used to capture neck pain and disability?

A. ODI B. NPRS C. NDI D. DASH

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