

Flex Therapist CEUs

Gluteal Amnesia

1. Which of the following best describes gluteal amnesia?

- A. A condition in which the gluteal muscles become overactive due to excessive exercise and strain.
 - B. A condition where the gluteal muscles become inhibited or underactive due to prolonged sitting and poor movement habits.
 - C. A disorder involving muscle hypertrophy caused by repetitive gluteal strengthening exercises.
 - D. A neurological condition that permanently damages the gluteal nerves and prevents muscle activation.
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2. Which of the following statements best explains the primary cause of gluteal amnesia?

- A. It results from overuse of the gluteal muscles during excessive physical activity, leading to fatigue and inhibition.
 - B. It develops when the gluteal muscles become permanently damaged from direct trauma or nerve injury.
 - C. It occurs due to prolonged sitting and a sedentary lifestyle, which cause tight hip flexors and weak, underactive gluteal muscles.
 - D. It is caused by excessive stretching of the hamstrings, which reduces gluteal activation and strength.
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3. Patients with gluteal amnesia commonly experience pain and tightness in the lower back and hamstrings due to:

- A. Overactivation of the gluteal muscles during hip extension
 - B. Compensatory overuse of surrounding muscles caused by poor glute activation
 - C. Increased flexibility in the hip flexors and quadriceps
 - D. Reduced activity in the lumbar extensors and hamstrings
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4. What functional consequence can result from weakness of the gluteus maximus?

- A. Trendelenburg gait, characterized by excessive pelvic drop on the opposite side
 - B. Improved hip extension and stronger posterior pelvic tilt
 - C. Increased lateral stability of the pelvis during single-leg stance
 - D. Enhanced hip external rotation and running performance
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5. Proper activation and strength of the gluteus maximus help prevent musculoskeletal injuries by:

- A. Increasing reliance on the hamstrings and lower back during movement
 - B. Limiting hip extension and reducing power output in athletic activities
 - C. Encouraging anterior pelvic tilt and excessive lumbar lordosis
 - D. Improving movement efficiency, stability, and reducing the risk of lower back, knee, and hip injuries
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6. During single-leg stance and gait, the gluteus medius primarily functions to:

- A. Stabilize the pelvis and prevent contralateral hip drop
 - B. Flex the hip and extend the knee
 - C. Rotate the spine and support lumbar extension
 - D. Lengthen the hamstrings and increase stride length
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7. The high proportion of type I fibers in the gluteus minimus makes it particularly well-suited for:

- A. Explosive power and sprinting activities
 - B. Endurance and postural control during prolonged weight-bearing tasks
 - C. Rapid hip extension and jumping
 - D. Lumbar spine rotation and trunk flexion
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8. What is the primary function of the deep lateral rotators of the hip during walking, running, or squatting?

- A. Facilitate hip flexion and knee extension
 - B. Increase lumbar spine mobility and trunk rotation
 - C. Maintain proper femoral head alignment and provide rotational control
 - D. Strengthen the quadriceps and hamstrings for propulsion
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9. Strengthening the deep lateral rotators of the hip is important for athletes because it:

- A. Increases hip flexion strength and knee extension power exclusively
 - B. Improves lumbar spine rotation while decreasing hip stability
 - C. Reduces the need for gluteus medius and minimus activation during single-leg stance
 - D. Enhances rotational control, lateral movement, and deceleration, reducing injury risk
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10. What happens during reciprocal inhibition in the hip muscles?

- A. The gluteal muscles become overactive and inhibit the hamstrings
 - B. Overactive hip flexors suppress the activation of their antagonist muscles, such as the glutes
 - C. Lumbar extensors prevent hip flexion during walking
 - D. Pelvic tilt automatically corrects itself without muscular involvement
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11. Which assessment can be used to identify compensatory patterns caused by gluteal amnesia?

- A. Prone Hip Extension Test, Overhead Squat Assessment, and gait analysis
 - B. Sit-and-Reach Test exclusively
 - C. Shoulder Flexion and Elbow Extension Test
 - D. Grip Strength Assessment
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12. Hyperreflexia and hyporeflexia are abnormal reflex responses that can indicate:

- A. Dysfunction of the vestibular system
 - B. Impaired cerebellar coordination
 - C. Overactive Golgi tendon organ activity
 - D. Central nervous system or peripheral nerve dysfunction
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13. How do mirror therapy and mental imagery benefit patients in rehabilitation?

- A. By strengthening muscles through high-intensity exercise
 - B. By replacing the need for cognitive or behavioral interventions
 - C. By promoting motor learning and neuroplastic changes without requiring physical movement
 - D. By directly improving joint range of motion without neural involvement
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14. Which strategies can be used to enhance cortical activation of the glutes?

- A. Passive stretching and joint mobilization only
 - B. High-intensity cardiovascular exercise without targeting the glutes
 - C. Solely strengthening the hamstrings and lower back muscles
 - D. Neuromuscular re-education, motor imagery, and functional electrical stimulation
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15. Why is core stabilization important for enhancing glute activation?

- A. The glutes and core work together to stabilize the pelvis and improve motor coordination
 - B. Core exercises directly strengthen the hamstrings, replacing glute function
 - C. Core stabilization reduces the need for task-specific training
 - D. Strengthening the core decreases the brain's involvement in glute activation
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16. What is a key first step when implementing motor imagery for gluteal rehabilitation?

- A. Performing high-intensity glute exercises immediately
 - B. Mentally visualizing the target movement in a quiet, distraction-free environment
 - C. Focusing solely on hamstring activation before glutes
 - D. Ignoring kinesthetic sensations and only watching the movement
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17. What is a common method of providing biofeedback for patients who have difficulty activating their glutes?

- A. Passive stretching of the hamstrings

- B. Performing cardiovascular exercises without focusing on the glutes
 - C. Isolating the lower back muscles exclusively
 - D. Surface electromyography (sEMG) that gives visual feedback on muscle activation
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18. Which of the following exercises is commonly used during the glute activation phase?

- A. Banded glute bridges
 - B. Leg press with heavy weights
 - C. Barbell back squats without focus on glute engagement
 - D. Seated calf raises
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19. How does progressive overload contribute to glute strengthening?

- A. By focusing only on bodyweight exercises without increasing load
 - B. By isolating the hamstrings and quadriceps to compensate for weak glutes
 - C. By gradually increasing resistance, repetitions, or time under tension to maximize strength adaptations
 - D. By performing exercises exclusively at a fast tempo without holds
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20. Which component of Pilates helps coordinate glute activation with other muscle groups?

- A. High-speed, repetitive motions without focus
 - B. Isolating only the hamstrings during exercises
 - C. Performing maximal resistance exercises from the start
 - D. Controlled breathing and deliberate movement patterns
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21. Which of the following exercises emphasizes glute activation while maintaining pelvic stability?

- A. Fast-paced jumping jacks
 - B. Side-lying clamshells
 - C. Seated leg extensions without glute focus
 - D. Bicep curls with dumbbells
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22. How can resistance training complement Pilates in glute rehabilitation?

- A. By replacing Pilates entirely without focus on movement quality
 - B. By targeting only the hamstrings and quadriceps while ignoring glute activation
 - C. By performing rapid, uncontrolled movements to fatigue the muscles
 - D. By providing progressive overload to strengthen the glutes and reinforce proper movement patterns
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23. What approach helps translate glute activation into real-world functional movements?

- A. Functional movement training, including squats, lunges, and balance exercises

- B. Only performing isolated glute bridges without variation
 - C. Rapid, high-repetition exercises without focus on form
 - D. Stretching the upper body exclusively
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24. Why is it important to create a comprehensive treatment plan?

- A. To focus only on stretching the glutes without strengthening
 - B. To provide the same exercises to every patient regardless of lifestyle
 - C. To restore strength, improve motor control, and reinforce neuromuscular activation
 - D. To avoid using progressive strengthening strategies
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25. What is the primary purpose of a thorough assessment in gluteal rehabilitation?

- A. To immediately start high-intensity strengthening exercises
 - B. To identify muscle imbalances, compensatory patterns, mobility restrictions, and functional deficits
 - C. To focus only on core muscles and ignore the glutes
 - D. To avoid tracking patient progress over time
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26. Which approach is emphasized in athletic gluteal rehabilitation to improve performance and prevent injury?

- A. Plyometric exercises, sprint drills, and dynamic resistance training
 - B. Static stretching only
 - C. Light walking and basic core exercises
 - D. Passive range-of-motion exercises without load
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27. How can eccentric loading help reduce the risk of injury during rehabilitation?

- A. By decreasing muscle flexibility
 - B. By isolating only the quadriceps
 - C. By promoting faster fatigue without strength gains
 - D. By increasing posterior chain strength and improving muscle control
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28. Which type of exercises are recommended in the early stages of post-surgical glute rehabilitation to activate muscles safely?

- A. High-intensity squats and lunges
 - B. Isometric glute squeezes and glute bridge holds
 - C. Sprinting and plyometric jumps
 - D. Heavy resistance band hip thrusts
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29. What exercise is particularly effective for improving single-leg stability in older adults?

- A. Chair squats
 - B. Seated bridges
 - C. Controlled step-ups on a low platform
 - D. Banded lateral steps
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30. Which strategy helps reduce lumbar strain while restoring gluteal function in patients with chronic pain?

- A. High-impact plyometrics
 - B. Core-glute synergy exercises
 - C. Maximal resistance training
 - D. Ignoring compensatory patterns
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