

Midwest School of Modern Pedorthics

Section Quiz: Patient Evaluation and Diabetes

1. A ___ Semmes-Weinstein monofilament is used to detect a loss of protective sensation.
 - a. 5.07 – 10gr
 - b. 10.7 – 5gr
 - c. 5.70 – 15 gr
 - d. 100gr
2. The ____ test is used to help quantify the height of the medial longitudinal arch.
 - a. Coleman block
 - b. Tinnel's
 - c. Thompson
 - d. Navicular drop
3. A ____ can be used to help map areas of high pressure on the plantar surface of the foot.
 - a. Durometer
 - b. Harris mat
 - c. Radiograph
 - d. Flux capacitor
4. A ____ gait deviation is associated with someone who has suffered a head injury or a cerebrovascular accident.
 - a. Shuffling
 - b. Steppage
 - c. Antalgic
 - d. Trendelenburg
5. The ____ can be palpated on the top of the foot between the 1st and 2nd metatarsals.
 - a. Posterior tibial artery
 - b. Sural artery
 - c. Dorsalis pedis artery
 - d. Ophiophagus hannah artery
6. A fasting glucose measurement of greater than ___ milligrams of glucose per deciliter of blood would indicate that a person has diabetes.
 - a. 100
 - b. 106
 - c. 118
 - d. 126
7. ____ is a cluster of conditions that occur together, increasing one's risk of heart disease, stroke and type 2 diabetes. These conditions include increased blood pressure, high blood sugar, excess body fat around the waist, and abnormal cholesterol or triglyceride levels.
 - a. Prediabetes
 - b. Metabolic syndrome
 - c. Veisalgia
 - d. Pinaceae disorder

8. It has been shown that socks with a high _____ content can increase the amount of shear and friction on the foot.
- Cotton
 - Bamboo
 - Nylon
 - Wool
9. _____, also known as Charcot's joint, is a chronic disease that causes the bones and joints to break down in a person with diabetic peripheral neuropathy.
- Neurotrophic osteotomy
 - Neuropathic arthroplasty
 - Neuropathic arthropathy
 - Neurotrophic orthopelia
10. _____ is a common presentation in a patient that has had a severe Charcot foot. _____ can be a useful shoe modification to accommodate this particular deformity.
- Pes cavus, lace-to-toe conversion
 - Rocker bottom foot, relast
 - Hallux varus, bubble patch
 - Jones fracture, extended steel shank
11. Which style of foot orthosis would be contraindicated for a patient with diabetes, severe neuropathy and foot deformities?
- Custom total contact foot orthosis
 - Accommodative EVA and Plastazote® orthosis
 - Trilaminar and cork foot orthosis
 - Rigid, functional foot orthosis
12. While it does not fall within the Scope of Practice of a CPed, a(n) _____ is a bivalve clamshell AFO with incorporated foot orthosis and rocker bottom.
- CROW
 - Arizona Brace
 - SCFO
 - KAFO
13. Diabetic foot ulcers are often preceded by a _____.
- Plantar wart
 - Callus
 - Hammertoe
 - Eructation
14. For eligible beneficiaries, Medicare covers _____.
- One pair of shoes and three pairs of inserts every 12 months
 - Two pairs of shoes and inserts every calendar year
 - Three pairs of shoes and one pair of inserts every 12 months
 - One pair of shoes and three pairs of inserts every calendar year
15. Research demonstrates that _____ can be a very effective tool on the prevention of neuropathic foot ulcers.
- Functional foot orthoses
 - Compression stockings

- c. Rocker soles
- d. Slip-on shoes