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Question: 1

The exercise continuum is a scale from left (1) to right (6) that is used to rate the difficulty of an exercise. Which way would the trainer be moving an exercise if he or she must modify it for an unconditioned client?

- A.Left
- B.Right
- C.Up
- D.Down

Answer: A

Explanation:

The exercise continuum is a scale from left (1) to right (6) that is used to rate the difficulty of an exercise. A client who cannot perform a given movement must have the exercise moved to the left (modified) to decrease difficulty.

Question: 2

What is the training volume of a session that consisted of five sets of eight repetitions at 10 pounds?

- A.32
- B.400
- C.260
- D.750

Answer: B

Explanation:

The volume of training is determined by the formula "repetitions x sets x resistance." In this case, $8 \times 5 \times 10 = 400$.

Question: 3

The exercise continuum is a scale from left (1) to right (6) that is used to rate the difficulty of an exercise. When giving your client an exercise to perform, you notice she moves the weight with ease. You decide to move the exercise from a 4 to a 5 on the exercise continuum. What is this called?

- A.Modification
- B.Engagement

- C.Progression
- D.Conditioning

Answer: C

Explanation:

Movement to the right on the exercise continuum, or increasing the difficulty of a given exercise, is called "progression" and is done when a given movement becomes too easy. Progression is achieved by increasing repetitions, increasing weight, increasing the speed of an exercise, or any combination of progressions.

Question: 4

As part of the circulatory system, blood travels in a closed-circuit loop through the heart and directly into which of the following?

- A.Capillaries
- B.Veins
- C.Arteries
- D.Ventricles

Answer: C

Explanation:

Blood travels continuously through the heart into the arteries. It then moves to the capillaries, the veins, and then back to the heart. The heart is made up of four chambers: two atria and two ventricles.

Question: 5

Which of the following is likely NOT a factor that plays into behavior change?

- A.Readiness for change
- B.Perceived self-efficacy
- C.Scheduling
- D.Cost

Answer: D

Explanation:

Behavior change is hindered by many things; the ability to change, scheduling, readiness, self-efficacy, scheduling, peer influence, and motivation are just a few. The cost, however, is a secondary conflict as changing one's behavior does not cost any money. The cost of a personal trainer, the cost of a gym membership, and so on, may be influences in the decision to change, but the cost

itself is usually used to mask a lack of motivation, low self-efficacy, or insufficient readiness.

Question: 6

Each of the following is a major sign or symptom suggestive of pulmonary, metabolic, or cardiovascular disease EXCEPT

- A. syncope.
- B. fatigue.
- C. ankle edema.
- D. orthopnea.

Answer: B

Explanation:

Fatigue is a normal result of exertion, especially at the start of an exercise program. Unusual fatigue or shortness of breath, syncope (dizziness), ankle edema, and orthopnea are all major signs or symptoms that suggest the presence of more serious diseases. Clients who exhibit these symptoms should be referred to a physician.

Question: 7

What is the process of weighing the pros and cons of behavior change with a client during intervention called?

- A. Decisional balance
- B. Transtheoretical modeling (TTM)
- C. Cognitive strategies
- D. Behavioral strategies

Answer: A

Explanation:

A decisional balance exercise helps a client determine the positives and negatives of behavior change and is used in conjunction with the TTM. Cognitive and behavioral strategies are used to combine stages of change and the process of change in the TTM.

Question: 8

A client's food log reveals she ate 40 grams of carbohydrates, 16 grams of protein, and 9 grams of fat for lunch yesterday. How many calories did your client consume during that meal?

- A.260 calories
- B.305 calories
- C.385 calories
- D.297 calories

Answer: B

Explanation:

Forty grams of carbohydrate at 4 calories per gram, 16 grams of protein at 4 calories per gram, and 9 grams of fat at 9 calories per gram equal a total of 305 calories: $(40 \times 4) + (16 \times 4) + (9 \times 9) = 305$.

Question: 9

The anatomical position can be described as which of the following?

- A.The body is erect, feet together, arms at the sides with palms facing forward, thumbs pointed away from the body, and fingers extended.
- B.The body is erect, feet hip width apart, arms at the sides with palms facing forward, thumbs pointed away from the body, and fingers extended.
- C.The body is erect, feet together, arms at the sides with palms facing forward, thumbs pointed away from the body, and fingers flexed.
- D.The body is erect, feet hip width apart, arms at the sides with palms facing rear, thumbs pointed toward the body, and fingers extended.

Answer: A

Explanation:

The universally accepted body position, for reference, is the anatomical position. It is described as the body being erect with the arms at the sides, palms facing forward with thumbs pointed away from the body, and fingers extended.

Question: 10

You notice your client has recorded weight fluctuations of more than 10 pounds over the past few self-monitored weigh-ins. He claims to still be feeling fat, despite having lost 15 percent of his original body weight since starting your program, and his food log shows minimal entries. Despite having made great progress so far, and being only halfway to his weight goal, your client is continually stopping to look in the mirror during sessions and appears uncomfortable. What is most likely going on with your client?

- A.This client may be suffering from a loss of motivation and would benefit from a change in programming.
- B.This client may be suffering from sickness and not feeling well.
- C.This client may be suffering from an eating disorder.
- D.This client may be entering the maintenance stage, and programming should shift from a weight loss goal to a resistance training/strength training- focused program.

Answer: C

Explanation:

Weight fluctuations of 10 or more pounds, depressed mood, obsession with one's appearance, disturbance of body image (claiming to "feel fat"), and severely restrictive diets are all signs and symptoms of an eating disorder. Personal trainers do not diagnose disorders; this client should be referred to a health care professional.



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