OCCUPATIONAL THERAPY – CHILD DEVELOPMENT, DOCUMENTATION, AND INTERVENTION STRATEGIES PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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https://otchilddevdocinterventionstrats.examzify.com

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

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How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

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Questions

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1. In the OT process, what is the step that follows evaluation?

A. Creation of the plan

B. Referral

C. Implementation of the plan

D. Measurement of outcomes

2. What is the purpose of assigning chores to school-age children?

A. To teach them responsibility and help them feel important as contributing members of the family.

B. To overwhelm them with nonessential tasks.

C. To replace parental involvement in daily care.

D. To create unnecessary family conflict.

3. Observable actions in social interaction skills include which of the following?

A. Use of language, communicative gestures, maintaining eye contact, and relating to others appropriately.

B. Running speed and endurance.

C. Handwriting legibility.

D. Problem-solving in mathematical contexts.

4. Which factor is considered in a Letter of Medical Necessity to justify intervention?

A. Alternatives attempted.

B. Patient's favorite snack.

C. Clinic color scheme.

D. Weather.

5. Why are ADLs important?

A. ADLs are crucial for self-efficacy, social participation, and are strong predictors of adult outcomes

B. ADLs are irrelevant to long-term outcomes

C. ADLs only impact physical health

D. ADLs are optional for functioning

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6. Which ethical consideration must be taken into account in documentation?

A. Documentation must support eligibility decisions and avoid over-identifying students.

B. Documentation should be brief and vague.

C. Documentation should focus only on what is easy to measure.

D. Documentation is optional for eligibility decisions.

7. Which items are essential to document for pragmatic discharge planning?

A. Whether goals were met, appropriateness of discharge, and if a safe plan is in place.

B. Final functional level, recommendations, Home Exercise Program (HEP) provided, and equipment needed.

C. Family medical history and genetic risk factors.

D. Insurance coverage and billing codes.

8. Progress notes are most directly used to support which of the following?

A. Continuation of care and justification for ongoing therapy.

B. Initial assessment only.

C. Discharge without ongoing care.

D. Administrative tasks unrelated to therapy.

9. Which interventions are used for the oral preparatory phase?

A. Removing food from utensils, chewing, and forming a bolus

B. Swallowing therapy exercises only

C. Pharyngeal swallows with feedback

D. Esophageal dilation

10. What is the role of imitation in developing self-care skills in children?

A. Children show interest in helping others by imitating simple household tasks as early as 2 years of age.

B. Imitation delays the development of self-care skills.

C. Self-care skills emerge independently of imitation.

D. Imitation is limited to language development.

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Answers

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1. A
2. A
3. A
4. A
5. A
6. A
7. B
8. A
9. A
10. A

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Explanations

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1. In the OT process, what is the step that follows evaluation?

A. Creation of the plan

B. Referral

C. Implementation of the plan

D. Measurement of outcomes

After gathering and interpreting the evaluation data, the next step is to create the plan of care. This is where the OT uses the findings to set individualized, meaningful goals and decide which interventions, services, and strategies will be used to achieve them. The plan specifies what will be done, by whom, how often, and for how long, and it aligns with the child's strengths, needs, and daily contexts. This planning step guides what happens in intervention and sets the foundation for later measurement of outcomes. Referral happens before evaluation, prompting the evaluation itself. Implementation and measurement of outcomes come after the plan is in place, with progress monitored to decide if adjustments are needed.

2. What is the purpose of assigning chores to school-age children?

A. To teach them responsibility and help them feel important as contributing members of the family.

B. To overwhelm them with nonessential tasks.

C. To replace parental involvement in daily care.

D. To create unnecessary family conflict.

Assigning chores to school-age children builds responsibility and a sense of belonging through meaningful contribution to the family. When kids handle age-appropriate tasks, they learn that their actions matter, develop independence, and gain confidence in their ability to manage small responsibilities. Chores also establish routines and practical life skills that prepare them for more complex duties later on, while reinforcing that everyone in the family shares in daily care. They should be reasonable for the child's developmental level and not replace parental involvement, which remains important for guidance and safety. Properly structured, chores can reduce family tension by clarifying expectations and offering predictable routines, rather than overwhelming the child.

3. Observable actions in social interaction skills include which of the following?

A. Use of language, communicative gestures, maintaining eye contact, and relating to others appropriately.

B. Running speed and endurance.

C. Handwriting legibility.

D. Problem-solving in mathematical contexts.

Observable social interaction skills are shown through what you can see someone doing during social exchanges. This includes using language to communicate ideas, acting with communicative gestures to support message meaning, maintaining eye contact to show attention and engagement, and relating to others in appropriate, reciprocal ways (taking turns, responding to others, showing interest). These outward behaviors demonstrate how a person handles social interaction in real situations. Other options don't fit because they focus on non-social abilities: running speed and endurance reflect physical fitness and gross motor function; handwriting legibility relates to fine motor skills and academic writing; problem-solving in mathematics is a cognitive/academic task.

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4. Which factor is considered in a Letter of Medical Necessity to justify intervention?

A. Alternatives attempted.

B. Patient's favorite snack.

C. Clinic color scheme.

D. Weather.

In a Letter of Medical Necessity, the aim is to show that occupational therapy is needed to address significant functional limitations and participation restrictions. A core part of this justification is documenting that alternatives have been tried or considered before committing to therapy. This can include non-therapy approaches, home programs, adaptive equipment trials, environmental modifications, or other less intensive interventions. Demonstrating that these options were attempted or assessed helps prove that OT services are the appropriate next step and that they're necessary to achieve meaningful outcomes. Factors like a patient's snack preference, the clinic's color scheme, or weather do not relate to medical necessity or the child's functional needs, so they aren't relevant to supporting intervention in this context.

5. Why are ADLs important?

A. ADLs are crucial for self-efficacy, social participation, and are strong predictors of adult outcomes

B. ADLs are irrelevant to long-term outcomes

C. ADLs only impact physical health

D. ADLs are optional for functioning

Mastery of activities of daily living (ADLs) is a foundation for a child's independence and participation in everyday life. When a child can self-feed, dress, bathe, use the bathroom, and move around with minimal assistance, they develop a sense of efficacy—believing they can manage daily tasks on their own. That growing self-efficacy fuels motivation to engage in school, play, and social activities, supporting ongoing participation with peers and caregivers. ADLs also strongly shape long-term outcomes. Early independence in self-care is linked to greater likelihood of living independently as an adult, pursuing education and employment, and managing health and daily routines with less family or societal support. In addition, the ability to perform ADLs intersects with cognitive and executive skills like planning, sequencing, and problem-solving, making them a key barometer of overall development. So, ADLs matter not only for immediate functioning but for social participation, self-esteem, and how well someone is likely to fare later in life. The other options miss these broader implications, focusing only on physical aspects or pretending ADLs don't influence long-term outcomes.

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6. Which ethical consideration must be taken into account in documentation?

A. Documentation must support eligibility decisions and avoid over-identifying students.

B. Documentation should be brief and vague.

C. Documentation should focus only on what is easy to measure.

D. Documentation is optional for eligibility decisions.

In documentation, a central ethical practice is to base eligibility decisions on solid evidence of actual need and to document the specific functional impact on participation. The best answer reflects that records should justify why a student qualifies for services and, at the same time, avoid over-identifying students—that is, not labeling or singling out students based on demographics or assumptions about disability. To put this into practice, gather clear, objective data from multiple sources—observations of everyday tasks, reliable assessments, and input from teachers and parents. Use this information to describe how the student's participation is limited, how those limitations affect daily activities, and how such limits meet established eligibility criteria. Provide a reasoned link between observed needs and proposed supports, and ensure confidentiality and respectful, non-stigmatizing language. Notes that are vague or only track what's easy to measure don't reliably justify eligibility or reflect true functional impact. And treating documentation as optional undermines accountability and the rights of students to access appropriate services.

7. Which items are essential to document for pragmatic discharge planning?

A. Whether goals were met, appropriateness of discharge, and if a safe plan is in place.

B. Final functional level, recommendations, Home Exercise Program (HEP) provided, and equipment needed.

C. Family medical history and genetic risk factors.

D. Insurance coverage and billing codes.

Discharge planning that is practical centers on concrete, actionable information that supports the patient to function safely at home after therapy ends. The final functional level communicates the patient's current abilities and remaining needs, providing a basis for what to expect after discharge. Recommendations translate goals into practical steps, including proposed activities, safety considerations, and follow-up plans. The Home Exercise Program gives a clear, self-directed routine to continue progress, with instructions and progression. Identifying equipment needed ensures the family knows what devices or aids are required and how to obtain them, enabling independence and reducing safety risks. Together these elements keep the plan realistic and implementable for the home setting. Background medical data like family history or genetic risk factors isn't part of the immediate discharge plan, and while insurance details matter administratively, they do not drive the patient-centered home-care actions in the plan.

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8. Progress notes are most directly used to support which of the following?

A. Continuation of care and justification for ongoing therapy.

B. Initial assessment only.

C. Discharge without ongoing care.

D. Administrative tasks unrelated to therapy.

Progress notes document what happened in therapy, how the child responded to interventions, and progress toward set goals. They are the clinical record that justifies continuing services by showing ongoing need, improvements or plateaus, and any changes to the plan. This documentation also supports communication among the care team and provides evidence for funding or authorization to continue therapy, making them essential for continuity of care in pediatric OT. Initial assessments are typically captured in the evaluation, not in ongoing progress notes. Discharge decisions rely on summarizing whether further therapy is needed, which progress notes can inform but do not themselves justify ending ongoing care. Administrative-only tasks fall outside the clinical purpose of progress notes, which focus on clinical outcomes and treatment planning.

9. Which interventions are used for the oral preparatory phase?

A. Removing food from utensils, chewing, and forming a bolus

B. Swallowing therapy exercises only

C. Pharyngeal swallows with feedback

D. Esophageal dilation

The oral preparatory phase is about getting the food ready to swallow by chewing, mixing with saliva, and forming a cohesive bolus. Interventions in this phase focus on how the lips, jaw, tongue, and cheeks work together to break down food and shape it into a single unit that can be safely moved toward the back of the mouth. Removing food from utensils, chewing, and forming a bolus directly target these actions—practicing how to take food from a spoon or fork, chew it effectively, and shape it into a swallowable bolus. That's exactly what the oral preparatory phase entails, making this option the best fit. Swallowing therapy exercises and pharyngeal swallow work pertain more to later stages of the swallow, such as the actual propulsion through the pharynx, while esophageal dilation addresses the esophagus itself, not the oral prep.

10. What is the role of imitation in developing self-care skills in children?

A. Children show interest in helping others by imitating simple household tasks as early as 2 years of age.

B. Imitation delays the development of self-care skills.

C. Self-care skills emerge independently of imitation.

D. Imitation is limited to language development.

Imitation is a fundamental way children learn self-care skills by watching and copying others. When kids see caregivers dress, feed, or brush teeth, they pick up the sequence, the motor actions, and the social cues needed to participate in those routines. By around age two, many children show interest in helping with simple tasks, and they begin practicing them with support, gradually becoming more independent. This modeling provides a concrete route for skill learning, builds confidence, and motivates engagement in daily activities—exactly what occupational therapy aims to foster in a child's self-care development. It isn't about delaying growth or emerging self-care in isolation; imitation gives hands-on practice that supports gradual independence. And while imitation supports language learning, its influence extends to motor and daily living skills as well.

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Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

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We wish you the very best on your exam journey. You've got this!

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