THERAPYED OTR CERTIFICATION PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://therapyedotr.examzify.com

Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright 1

Table of Contents 2

Introduction 3

How to Use This Guide 4

Questions 5

Answers 8

Explanations 10

Next Steps 16

SAMPLE

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.

SAMPLE

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!

SAMPLE

Questions

SAMPLE

1. **For an individual with hemiparesis, which adaptive device might the occupational therapist consider for daily living tasks?**

   A. A standard knife and fork

   B. An adaptive cutting board for food preparation

   C. A set of unweighted utensils

   D. A traditional handheld can opener

2. **For a 6-year-old child with figure ground perception difficulties transitioning out of occupational therapy, what discharge recommendation is best?**

   A. Use a multi-colored binder for school materials

   B. Change classroom seating arrangements

   C. Use a different solid-color folder to hold materials for each class subject

   D. Organize materials in a large box for easy access

3. **For a patient with incomplete spinal cord injury, which secondary diagnosis might be significant when conducting a home evaluation?**

   A. Diabetes mellitus

   B. Thromboangiitis obliterans

   C. Congenital heart disease

   D. Multiple sclerosis

4. **How should an occupational therapist respond to a family offering a cash gift for services rendered?**

   A. Politely accept the gift but donate it

   B. Decline the gift and explain the no-gift policy

   C. Accept the gift and thank them

   D. Suggest a charitable donation instead

5. **What is the best intervention for a child with myelomeningocele who has not achieved a pincer grasp after therapy?**

   A. Focus on strengthening hand muscles through play

   B. Teach the child to use gross grasp and lateral pinch for functional activities

   C. Introduce assistive devices for grasping

   D. Encourage more practice with daily living tasks

SAMPLE

6. What type of sensory input is best to recommend for a child suffering from sensory deprivation?

A. Fast, rhythmic bouncing

B. Slow rocking

C. Bright light exposure

D. Quiet, still environments

7. During orientation, which policies and procedures are most important for an occupational therapy supervisor to include?

A. Medication management policies

B. Patient confidentiality practices

C. Crisis intervention policies

D. Documentation procedures

8. During group therapy, what is an effective way to encourage interaction among clients?

A. Assign tasks individually

B. Create open-ended discussion prompts

C. Limit movement within the space

D. Incorporate solo activities

9. For a 2-year-old child aiming to develop pincer grasp skills, which activity is the most appropriate for an occupational therapist to implement?

A. Using play-dough to make shapes

B. Sorting small blocks by color

C. Finger feeding of O-shaped cereal

D. Stringing large beads onto a lace

10. Which symptom might indicate a possible lithium overdose in a client diagnosed with bipolar disorder?

A. Gross hand tremors

B. Increased sleeping patterns

C. Improved social interactions

D. Decreased appetite

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. For an individual with hemiparesis, which adaptive device might the occupational therapist consider for daily living tasks?

A. A standard knife and fork

B. An adaptive cutting board for food preparation

C. A set of unweighted utensils

D. A traditional handheld can opener

An adaptive cutting board for food preparation is a strategic choice for individuals with hemiparesis, as it is designed to accommodate their specific needs, promoting independence and safety during meal preparation. This adaptive device often features stabilizing edges or clamps that hold food securely in place, allowing the user to use one hand effectively to chop or slice without the risk of sliding or spilling. The key benefit of choosing an adaptive cutting board is that it enables individuals to perform tasks that may otherwise be challenging due to weakness or lack of coordination in one arm. By providing support and stability, this device enhances the ability to engage in daily living tasks, encouraging autonomy and enhancing the quality of life. In contrast, standard utensils and tools, such as conventional knives and forks or a traditional handheld can opener, may not offer the necessary support for someone with hemiparesis. These items may not account for the motor limitations or the need for adaptations to ensure safe and effective use. While unweighted utensils may assist someone who struggles with grip strength, they do not specifically address the challenges associated with stability during food preparation as effectively as an adaptive cutting board does.

2. For a 6-year-old child with figure ground perception difficulties transitioning out of occupational therapy, what discharge recommendation is best?

A. Use a multi-colored binder for school materials

B. Change classroom seating arrangements

C. Use a different solid-color folder to hold materials for each class subject

D. Organize materials in a large box for easy access

Using a different solid-color folder to hold materials for each class subject is an effective recommendation for a child struggling with figure-ground perception difficulties. This approach simplifies the organization of materials, allowing the child to more easily identify and differentiate between items based on color coding. Each subject having its own distinct folder minimizes visual clutter and aids in spatial awareness, making it easier for the child to locate and retrieve materials independently. Color coding can provide visual cues that enhance recognition and understanding of where to find specific items. This structured approach can foster more effective organizational skills, which is crucial as the child transitions out of occupational therapy and into a school setting. In contrast, while using a multi-colored binder (as suggested in the first option) could also assist with organization, it may not provide as clear a method of categorization as individual solid-color folders would, especially since it might lead to visual confusion if multiple subjects are housed within one binder. Changing classroom seating arrangements may help with overall engagement and focus, but doesn't directly address the specific challenges presented by figure-ground perception. Organizing materials in a large box could contribute to disorganization, making it difficult for the child to locate necessary items quickly, which can exacerbate the very difficulties that are being addressed. Thus, the chosen

SAMPLE

3. For a patient with incomplete spinal cord injury, which secondary diagnosis might be significant when conducting a home evaluation?

A. Diabetes mellitus

B. Thromboangiitis obliterans

C. Congenital heart disease

D. Multiple sclerosis

When conducting a home evaluation for a patient with an incomplete spinal cord injury, having an understanding of thromboangiitis obliterans as a significant secondary diagnosis is crucial. This condition, also known as Buerger's disease, is characterized by inflammation and thrombosis in the blood vessels, primarily affecting the limbs. In patients with spinal cord injuries, circulation can already be compromised due to altered mobility and increased risk of venous thromboembolism. Identifying thromboangiitis obliterans in the home evaluation context may influence recommendations regarding home modifications, accessibility, and safety interventions, as the patient may be at a higher risk for wounds or infections due to poor circulation. Adequate circulation is essential for healing and overall health, and understanding this diagnosis can guide an occupational therapist in assessing risks in the home environment and implementing necessary changes to promote optimal health and safety. Other options, while they may present their own challenges, do not have the same direct implications on home safety and modifications related to circulation and mobility as thromboangiitis obliterans. For instance, diabetes mellitus is significant but often pertains more to monitoring and managing blood glucose levels than to immediate home safety concerns in the context of a spinal cord injury. Congenital heart disease

4. How should an occupational therapist respond to a family offering a cash gift for services rendered?

A. Politely accept the gift but donate it

B. Decline the gift and explain the no-gift policy

C. Accept the gift and thank them

D. Suggest a charitable donation instead

The most appropriate response for an occupational therapist when offered a cash gift for services rendered is to decline the gift and explain the no-gift policy. This is consistent with ethical guidelines set forth by professional organizations, such as the American Occupational Therapy Association (AOTA), which discourage accepting gifts of substantial value. Accepting gifts can create a conflict of interest, potentially compromise the therapeutic relationship, and lead to perceptions of favoritism or bias. By declining the cash gift and explaining the rationale behind a no-gift policy, the therapist reinforces professional boundaries and maintains the integrity of the occupational therapy profession. This response not only protects the therapist but also helps educate the family on professional standards, fostering an understanding of the therapist's commitment to ethical practice.

SAMPLE

5. What is the best intervention for a child with myelomeningocele who has not achieved a pincer grasp after therapy?

A. Focus on strengthening hand muscles through play

B. Teach the child to use gross grasp and lateral pinch for functional activities

C. Introduce assistive devices for grasping

D. Encourage more practice with daily living tasks

Focusing on teaching the child to use a gross grasp and lateral pinch for functional activities is particularly beneficial in this scenario. Children with myelomeningocele may face various challenges that impact their motor skills and functional abilities, so adapting their grasping techniques can allow them to participate more effectively in daily tasks. Using a gross grasp and lateral pinch enables the child to manipulate objects without requiring the refined dexterity of a pincer grasp. This is especially important for children who may have limited strength or fine motor control due to their condition. By emphasizing functional activities that incorporate these grasping techniques, the child can engage in play, self-care tasks, and other activities, thereby enhancing their overall independence and confidence. Other options may also play a role in intervention strategies, but they do not specifically address the pressing need for the child to achieve effective manipulation of objects at this stage. Strengthening muscles or introducing assistive devices may have their place later on, but the immediate goal of promoting functional use of the hands with accessible techniques can yield quicker, more valuable improvements in the child's daily life.

6. What type of sensory input is best to recommend for a child suffering from sensory deprivation?

A. Fast, rhythmic bouncing

B. Slow rocking

C. Bright light exposure

D. Quiet, still environments

Recommending slow rocking as a type of sensory input for a child suffering from sensory deprivation is effective because it provides a calming, rhythmic stimulation that can help regulate the child's sensory processing. This kind of input can create a sense of security and comfort, addressing feelings of instability or anxiety that often accompany sensory deprivation. Slow rocking mimics a soothing motion similar to being held or cradled, which is beneficial for emotional regulation and can enhance a child's awareness of their body in space – a critical aspect of sensory integration. In contrast, fast, rhythmic bouncing might be too stimulating for a child experiencing sensory deprivation, as it could provoke anxiety rather than reassurance. Bright light exposure can be overwhelming, particularly if the child is already struggling with sensory processing; too much light may increase discomfort or agitation. Quiet, still environments, while seemingly appropriate, do not actively engage the child's sensory needs and may contribute to feelings of isolation when they require more soothing input to help them reconnect with their sensory experiences. Slow rocking, therefore, strikes a balance between providing stimulation that is gentle but effective for sensory processing needs.

SAMPLE

7. During orientation, which policies and procedures are most important for an occupational therapy supervisor to include?

A. Medication management policies

B. Patient confidentiality practices

C. Crisis intervention policies

D. Documentation procedures

Crisis intervention policies are a crucial aspect to include during orientation for an occupational therapy supervisor because they outline the processes and protocols for effectively responding to emergency situations that may arise in a therapeutic setting. These policies ensure that all staff members are prepared to handle crises safely and efficiently, creating a secure environment for both clients and practitioners. Understanding these procedures helps in developing staff confidence to act decisively in emergency situations, thereby safeguarding client well-being. Incorporating crisis intervention policies into orientation also aligns with the broader responsibilities of occupational therapy professionals, which include not only addressing the therapy needs of clients but also ensuring a safe therapeutic environment. Familiarity with crisis management can be essential in minimizing risk and fostering an environment where clients can thrive physically and emotionally. While medication management policies, patient confidentiality practices, and documentation procedures are all critical to the effective functioning of an occupational therapy practice, the immediate response to crises can have significant implications for safety and care, making it a top priority during initial training sessions.

8. During group therapy, what is an effective way to encourage interaction among clients?

A. Assign tasks individually

B. Create open-ended discussion prompts

C. Limit movement within the space

D. Incorporate solo activities

Creating open-ended discussion prompts is a highly effective way to encourage interaction among clients during group therapy. Open-ended questions stimulate dialogue by allowing clients to express their thoughts, feelings, and experiences more freely. This format invites diverse perspectives and enables participants to engage in meaningful conversations, enhancing their connections with one another. When clients feel encouraged to share openly, they are more likely to interact with their peers, fostering an environment of support and collaboration. This approach not only helps individuals practice communication skills but also builds a sense of community within the group as members respond to and build upon each other's contributions. In contrast, assigning tasks individually, limiting movement, and incorporating solo activities can inhibit social interactions. These practices may lead to isolation and reduced communication among participants, which goes against the goal of promoting interaction and group cohesion in therapy settings. Therefore, using open-ended discussion prompts is essential for creating a dynamic and interactive group therapy experience.

SAMPLE

9. For a 2-year-old child aiming to develop pincer grasp skills, which activity is the most appropriate for an occupational therapist to implement?

A. Using play-dough to make shapes

B. Sorting small blocks by color

C. Finger feeding of O-shaped cereal

D. Stringing large beads onto a lace

Focusing on the development of pincer grasp skills in a 2-year-old, finger feeding of O-shaped cereal is a highly appropriate activity. This task encourages the child to use their thumb and index finger to pick up the small pieces of cereal, which directly targets and enhances the pincer grasp. The cereal's shape and size are manageable for little hands, making it easier for the child to practice this skill in a fun and engaging way. In contrast, while using play-dough to make shapes and sorting small blocks by color provide beneficial tactile and visual experiences, they may not specifically promote the pincer grasp to the same extent. Play-dough can be manipulated in various ways that may encourage different grasp patterns, and sorting blocks often involves whole hand or palm grasp rather than isolated finger use. Stringing large beads onto a lace also requires hand-eye coordination and fine motor skills, but it generally involves a more complex grasp and may not isolate the pincer grasp as effectively as finger feeding does. Thus, finger feeding of O-shaped cereal stands out as the most direct way to enhance the specific skill of pincer grasping in a toddler.

10. Which symptom might indicate a possible lithium overdose in a client diagnosed with bipolar disorder?

A. Gross hand tremors

B. Increased sleeping patterns

C. Improved social interactions

D. Decreased appetite

Gross hand tremors are a classic symptom that can indicate a potential lithium overdose, particularly for individuals diagnosed with bipolar disorder. Lithium is a mood stabilizer commonly used to treat bipolar disorder, but it has a narrow therapeutic range, meaning the difference between a therapeutic dose and a toxic dose is small. When a patient experiences gross hand tremors, it suggests that lithium levels may be too high in their system. This symptom typically occurs early in the onset of toxicity and is often accompanied by other signs such as gastrointestinal distress, sedation, or confusion. Monitoring for tremors is essential in patients on lithium as it can help identify the need for dose adjustments or further medical evaluation to prevent more severe complications associated with lithium toxicity. The other options do not align with symptoms indicating lithium overdose. Increased sleeping patterns and improved social interactions could be side effects of the medication that do not specifically signal overdose. Decreased appetite may not be directly linked either, as it can result from various factors unrelated to lithium toxicity. Thus, gross hand tremors are the key indicator of possible overdose in this context.

SAMPLE

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:

https://therapyedotr.examzify.com

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

SAMPLE