

ADA and Direct Access Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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.

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!

Questions

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- 1. What does ICD stand for in the context of disease coding?**
 - A. Integrated Coding of Diagnoses**
 - B. Intraoperative Documentation Codes**
 - C. Index of Clinical Data**
 - D. International Classification of Diseases**

- 2. Which statement best describes past records of physical or mental impairment under the ADA?**
 - A. A temporary illness lasting a week**
 - B. A cosmetic scar**
 - C. Past records of physical or mental impairment from which they have partially or fully recovered**
 - D. A personality trait**

- 3. In ADA ramp design, what does a slope of 1:12 indicate?**
 - A. 12 inches vertical for 1 inch horizontal**
 - B. 1 inch vertical for every 12 inches horizontal**
 - C. 6 inches vertical for every 1 inch horizontal**
 - D. 1 inch vertical for every 6 inches horizontal**

- 4. How does a facility show conformance to ADA Standards?**
 - A. By following local building codes only.**
 - B. By providing signage only.**
 - C. By designing and constructing according to the ADA Standards for Accessible Design, and maintaining accessibility.**
 - D. By hiring a disability ombudsperson.**

- 5. What does 'readily achievable barrier removal' mean and when does it apply?**
 - A. Barriers that can be removed regardless of cost; applies to new construction**
 - B. Barriers that can be removed or altered easily, without substantial difficulty or expense; applies to existing facilities under Title III**
 - C. Barriers never to be removed; never applies**
 - D. Barriers that require building-wide renovations; applies to all titles**

- 6. Which feature is typically included to aid signage accessibility?**
- A. Decorative fonts.**
 - B. Height above 100 inches.**
 - C. Bright colors alone.**
 - D. Tactile braille.**
- 7. Which best describes how a diagnosis is made?**
- A. Process of determining by examination the nature and circumstance of a diseased condition**
 - B. Identification of the nature of an illness or problem by examination of the symptoms**
 - C. Act of identifying a disease, illness, or problem by examining someone or something**
 - D. Prescription of medications**
- 8. If a patient already has a treating health care professional, should the PT notify the professional about patient progress?**
- A. No, do not notify them.**
 - B. Only if progress is significant.**
 - C. Only if the patient requests.**
 - D. Yes, notify them.**
- 9. Which Title addresses public accommodations?**
- A. Title I Employment**
 - B. Title II Public Service**
 - C. Title III Public Accommodations**
 - D. Title IV Telecommunications**
- 10. Under Title III, how should existing facilities address barrier removal?**
- A. Barriers should be removed only if the building is being renovated.**
 - B. Barriers should be removed if readily achievable; if not, provide alternative means of access or lift.**
 - C. All barriers must be removed regardless of feasibility.**
 - D. Barriers do not need to be addressed in existing facilities.**

Answers

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

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Explanations

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1. What does ICD stand for in the context of disease coding?

- A. Integrated Coding of Diagnoses**
- B. Intraoperative Documentation Codes**
- C. Index of Clinical Data**
- D. International Classification of Diseases**

ICD stands for International Classification of Diseases. This is the globally used system published by the World Health Organization to classify diseases and a wide range of health problems for reporting, statistics, and billing. In practice, clinicians and coders often refer to ICD-10-CM for diagnoses in the United States and ICD-10-PCS for procedures, which together help track health trends and support reimbursement. The other phrases listed aren't recognized names for this coding framework and don't describe the standard method for coding diseases.

2. Which statement best describes past records of physical or mental impairment under the ADA?

- A. A temporary illness lasting a week**
- B. A cosmetic scar**
- C. Past records of physical or mental impairment from which they have partially or fully recovered**
- D. A personality trait**

Past records of impairment are protected under the ADA because the law covers people who have had a disability in the past, not only those who are currently disabled. This means that even if the condition has partially or fully recovered, a history of that impairment can still qualify a person for protection against discrimination. The statement describing past records of physical or mental impairment from which they have recovered aligns with that protection, illustrating how a history of impairment remains relevant even after recovery. The other options don't fit that protection: a temporary illness lasting a week is typically not considered a disability; a cosmetic scar generally isn't a disability unless it causes a functional limitation; and a personality trait isn't classified as a disability under the ADA.

3. In ADA ramp design, what does a slope of 1:12 indicate?

- A. 12 inches vertical for 1 inch horizontal**
- B. 1 inch vertical for every 12 inches horizontal**
- C. 6 inches vertical for every 1 inch horizontal**
- D. 1 inch vertical for every 6 inches horizontal**

The key idea is how to read the ratio as rise over run. A slope of 1:12 means you gain 1 inch of vertical height for every 12 inches of horizontal travel. In other words, for each foot you move forward, you rise about 1 inch, which is about an 8.3% grade. This is the standard maximum slope used in ADA ramp design to keep ramps accessible for wheelchairs. If you need to rise more than a small amount, you must add landings to keep each section within that 1:12 limit. For example, a 6-inch rise requires 72 inches (6 feet) of ramp run. The other options describe steeper or different ratios that do not match the 1:12 standard.

4. How does a facility show conformance to ADA Standards?

- A. By following local building codes only.
- B. By providing signage only.
- C. By designing and constructing according to the ADA Standards for Accessible Design, and maintaining accessibility.**
- D. By hiring a disability ombudsperson.

Conformance means designing and constructing the facility to the ADA Standards for Accessible Design and then keeping those accessibility features functional over time. The Standards lay out concrete criteria for elements like accessible routes, doors, reach ranges, restrooms, parking, and signage, so following them from the start ensures the space is usable by people with disabilities. Merely adhering to local building codes or adding signage alone isn't enough, because codes can vary and may not cover all accessibility needs. Maintenance matters too—damaged or obstructed features can negate prior compliance, so ongoing care is essential. An ombudsperson handles advocacy or complaints, not proof of conformance.

5. What does 'readily achievable barrier removal' mean and when does it apply?

- A. Barriers that can be removed regardless of cost; applies to new construction
- B. Barriers that can be removed or altered easily, without substantial difficulty or expense; applies to existing facilities under Title III**
- C. Barriers never to be removed; never applies
- D. Barriers that require building-wide renovations; applies to all titles

Readily achievable barrier removal means removing barriers in existing facilities when it can be done easily and without substantial difficulty or expense. This standard applies to existing facilities under Title III, which covers places of public accommodation and commercial facilities. It's about making practical, achievable changes rather than requiring major renovations; new construction already must be accessible by design, not through later removal. So the idea is to remove or alter barriers that are easily doable and not cost-prohibitive, specifically in existing facilities governed by Title III.

6. Which feature is typically included to aid signage accessibility?

- A. Decorative fonts.**
- B. Height above 100 inches.**
- C. Bright colors alone.**
- D. Tactile braille.**

Signage accessibility means designing signs so people with different abilities can get the information they need. Tactile braille on signs lets someone read the info by touch, which is essential for those who are blind or have significant vision impairments. By including raised characters along with braille, the sign communicates text visually to sighted users and tactually to users who rely on touch, making navigation and safety information accessible to a broader audience. Decorative fonts, placement too high, or color alone don't provide usable information for someone who can't read printed text, so tactile braille is the feature that most effectively aids accessibility.

7. Which best describes how a diagnosis is made?

- A. Process of determining by examination the nature and circumstance of a diseased condition**
- B. Identification of the nature of an illness or problem by examination of the symptoms**
- C. Act of identifying a disease, illness, or problem by examining someone or something**
- D. Prescription of medications**

Diagnosing is a structured process of determining what condition a patient has and the context in which it appears, based on examination and the information gathered from history, signs, symptoms, and often tests. This choice captures both identifying the nature of the problem and understanding its circumstances, which is what diagnosis entails. It goes beyond simply noting symptoms or administering treatment: it combines findings to specify the exact disease or issue. Prescribing medications is a treatment step, not the act of making a diagnosis, and options that focus only on symptoms describe a limited part of what diagnosing involves.

8. If a patient already has a treating health care professional, should the PT notify the professional about patient progress?

- A. No, do not notify them.**
- B. Only if progress is significant.**
- C. Only if the patient requests.**
- D. Yes, notify them.**

Coordinating care with other health professionals is essential when a patient already has a treating clinician. Sharing updates about progress helps ensure the plan remains coherent, safe, and effective. When a patient is under the care of someone else, the treating professional needs to know how the patient is responding to therapy, what changes have occurred, and whether any adjustments to the treatment plan are needed. This communication supports continuity of care and helps prevent gaps or conflicting recommendations. Sharing progress should be done with respect to patient privacy and consent. Information should be shared with the appropriate clinician and through secure channels, and only to the extent necessary to coordinate care. Even if progress seems modest, it can influence decisions about therapy intensity, goals, or referrals. Choices suggesting not notifying, notifying only when progress is significant, or only if the patient requests delay essential collaboration and can compromise safety and effectiveness. Therefore, informing the treating professional about patient progress is the best practice.

9. Which Title addresses public accommodations?

- A. Title I Employment**
- B. Title II Public Service**
- C. Title III Public Accommodations**
- D. Title IV Telecommunications**

Public accommodations are addressed by Title III. This part of the ADA focuses on private businesses and nonprofit organizations that serve the public—places like restaurants, hotels, theaters, stores, banks, museums, and similar venues. It prohibits discrimination against individuals with disabilities and requires accessibility for these spaces, including removing barriers that are readily achievable and ensuring new facilities meet accessible design standards. The aim is to make everyday public spaces usable by everyone. Other parts of the ADA cover different areas: Title I protects employees with disabilities and requires reasonable accommodations in the workplace; Title II covers state and local government programs and services; Title IV deals with telecommunications accessibility. Since the question specifically asks about public accommodations, Title III is the appropriate focus.

10. Under Title III, how should existing facilities address barrier removal?

- A. Barriers should be removed only if the building is being renovated.**
- B. Barriers should be removed if readily achievable; if not, provide alternative means of access or lift.**
- C. All barriers must be removed regardless of feasibility.**
- D. Barriers do not need to be addressed in existing facilities.**

Under Title III, existing facilities must remove barriers to the extent that it is readily achievable. If removing a barrier isn't readily achievable, the facility must provide alternative means of access or use a lift to ensure equal access to programs and services. So the best choice reflects removing barriers when feasible and offering alternatives otherwise. Removing barriers only during renovations isn't the sole path, and not addressing barriers at all isn't allowed, while demanding removal of every barrier regardless of feasibility isn't required either.

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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:

<https://adadirectaccess.examzify.com>

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

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