

ARIZONA STATE UNIVERSITY (ASU) SHS205 EXPLORING COMMUNICATION DISORDERS IN CHILDREN AND ADULTS FINAL PRACTICE EXAM (SAMPLE) STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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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 aspect of speech is affected by dysarthria?**
 - A. Volume and intonation
 - B. Speed and clarity
 - C. Grammar and vocabulary
 - D. All of the above
- 2. In which type of voice disorder does emotional or psychological distress primarily contribute to the condition?**
 - A. Neurological
 - B. Functional
 - C. Psychogenic
 - D. Structural
- 3. Which of the following is NOT a characteristic of word-finding problems in children with specific language impairments?**
 - A. Natural pauses or latency
 - B. Usage of specific words
 - C. Ease of confrontation naming
 - D. Rapid speech without pauses
- 4. The velum is crucial for which type of sound production?**
 - A. Vocal cords
 - B. Nasal sounds
 - C. High-frequency sounds
 - D. Low-frequency sounds
- 5. Aspiration occurs when food enters which part of the body?**
 - A. Esophagus
 - B. Pharynx
 - C. Trachea
 - D. Stomach

- 6. True or False: Many parents refer to children with language delay as "slow talkers."**
- A. True
 - B. False
 - C. Only if the delay is severe
 - D. Only if they are younger than five
- 7. What is the primary function of the occipital lobe?**
- A. Motor control
 - B. Somatosensory processing
 - C. Visual processing
 - D. Auditory processing
- 8. To be diagnosed with a developmental language disorder, what additional characteristics must a child have?**
- A. Normal mathematics skills
 - B. Normal hearing and normal neurological status
 - C. Advanced reading skills
 - D. High levels of creativity
- 9. Which of the following describes a common language error displayed by children?**
- A. Using multiple pronouns correctly
 - B. Omitting tense markers in speech
 - C. Maintaining conventional turn-taking rules
 - D. Using complex grammatical structures
- 10. Which sounds are critically directed into the nasal passages by lowering the velum?**
- A. Cereal sounds
 - B. Nasal sounds
 - C. Vowel sounds
 - D. Consonant sounds

Answers

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

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Explanations

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1. What aspect of speech is affected by dysarthria?

- A. Volume and intonation
- B. Speed and clarity**
- C. Grammar and vocabulary
- D. All of the above

Dysarthria primarily impacts the physical production of speech due to neuromuscular impairments. As a result, the characteristics that are predominantly affected include the speed and clarity of speech. Individuals with dysarthria may struggle with articulating words clearly, leading to slurred or slow speech, which directly influences how well speech can be understood. Volume and intonation, while potentially affected, are often secondary to the primary issues of speech execution that dysarthria causes. In contrast, grammar and vocabulary are generally unaffected by dysarthria since these language components involve cognitive processes rather than the physical ability to produce speech sounds. Thus, the consideration of speed and clarity encompasses the central features impacted by dysarthria, making it the most suitable choice in this context.

2. In which type of voice disorder does emotional or psychological distress primarily contribute to the condition?

- A. Neurological
- B. Functional
- C. Psychogenic**
- D. Structural

A voice disorder that is primarily influenced by emotional or psychological distress is classified as psychogenic. In these cases, the individual may experience symptoms such as hoarseness or loss of voice not due to any physical abnormalities or damage, but rather from underlying psychological issues. This can include stress, anxiety, depression, or other emotional factors that manifest in the voice. Psychogenic voice disorders can often be complex, requiring an understanding of both the psychological and physiological aspects of voice production. Treatment usually involves a combination of voice therapy and psychological support to address the emotional factors contributing to the voice disorder. In contrast, neurological disorders arise from changes or damage to the nervous system, often affecting motor control of the vocal cords. Functional disorders involve improper use of the voice without an identifiable physical cause, while structural disorders are due to changes in the laryngeal anatomy, such as nodules or polyps on the vocal cords. Each of these types involves different underlying mechanisms, making psychogenic disorders distinct in their primary association with emotional distress.

3. Which of the following is NOT a characteristic of word-finding problems in children with specific language impairments?

- A. Natural pauses or latency
- B. Usage of specific words
- C. Ease of confrontation naming
- D. Rapid speech without pauses**

Children with specific language impairments (SLI) often experience a range of difficulties related to language, including word-finding problems. A characteristic feature of these issues is the tendency to have natural pauses or latency when trying to retrieve words. This means that when they struggle to find the right word, they may pause or take longer than typical to respond. In contrast, ease of confrontation naming is typically not observed in children with SLI, as they may struggle when asked to name objects or pictures quickly. The use of specific words indicates that even if they can find words, they may not use them correctly or may utilize a very limited vocabulary related to the context. Rapid speech without pauses, however, does not align with the classic challenges of word-finding difficulties. Children with word-finding issues generally exhibit slower, more measured speech with noticeable hesitations and pauses. Therefore, the characteristic of rapid speech without pauses is not consistent with the typical profile of children who have word-finding problems associated with specific language impairments.

4. The velum is crucial for which type of sound production?

- A. Vocal cords
- B. Nasal sounds**
- C. High-frequency sounds
- D. Low-frequency sounds

The velum, or soft palate, plays a crucial role in the production of nasal sounds. When producing these sounds, such as /m/, /n/, and /ŋ/ (as in "sing"), the velum must lower to allow airflow through the nasal cavity. This distinctively characterizes nasal sounds, as opposed to oral sounds, where the velum is raised to block airflow through the nose, directing it out of the mouth instead. Therefore, the function of the velum in regulating airflow is essential for accurately producing nasal sounds, making this answer the correct choice. Understanding the location and role of the velum enhances knowledge of how different speech sounds are articulated and the physiological processes involved in speech production.

5. Aspiration occurs when food enters which part of the body?

- A. Esophagus
- B. Pharynx
- C. Trachea**
- D. Stomach

Aspiration occurs when food, liquid, or other foreign materials enter the trachea, which is the airway leading to the lungs. This can cause significant respiratory issues, as the trachea is not designed to deal with these substances. Normally, when swallowing, food should pass from the mouth to the pharynx and then down to the esophagus, where it continues to the stomach. However, if the swallowing mechanism fails or is compromised, food can mistakenly go into the trachea instead of the esophagus. This is particularly concerning as it can lead to choking or aspiration pneumonia, where the lungs become inflamed due to the presence of these materials. Understanding this process is crucial in recognizing how communication disorders, particularly those involving swallowing, can impact health.

6. True or False: Many parents refer to children with language delay as "slow talkers."

A. True

B. False

C. Only if the delay is severe

D. Only if they are younger than five

Many parents do indeed refer to children with language delays as "slow talkers." This term is often used by caregivers to describe their child's communication development when it appears to be progressing more slowly than that of their peers. The label "slow talker" typically reflects a parent's observation of a child who may not be producing speech sounds or using words at the expected developmental milestones, leading to concerns about language acquisition. Language delay can encompass a variety of issues, including limited vocabulary, challenges in understanding language, or difficulties with sentence structure and grammar. By using the term "slow talkers," parents may convey their perception of the child's speech development in a relatable way, though it is important for professionals to assess and provide appropriate interventions if needed. Understanding this terminology is relevant for those studying communication disorders, as it reflects societal attitudes towards language development and the importance of early intervention.

7. What is the primary function of the occipital lobe?

A. Motor control

B. Somatosensory processing

C. Visual processing

D. Auditory processing

The occipital lobe is primarily responsible for visual processing in the brain. It is located at the back of the brain and contains the primary visual cortex, which receives and interprets visual information from the eyes. This includes aspects such as color, light, shape, and motion detection. The visual information processed in the occipital lobe is crucial for understanding visual stimuli, which is essential for navigation, recognition of objects and faces, and interacting with the environment. Understanding why visual processing is the primary function highlights the specialization of different brain areas. Each lobe of the brain is designed to handle specific types of information, with the occipital lobe distinctly dedicated to processing visual data, confirming its critical role in enabling individuals to see and interpret the world around them.

8. To be diagnosed with a developmental language disorder, what additional characteristics must a child have?

- A. Normal mathematics skills
- B. Normal hearing and normal neurological status**
- C. Advanced reading skills
- D. High levels of creativity

The correct answer focuses on the requirement for a child to have normal hearing and normal neurological status in order to accurately diagnose a developmental language disorder. This is crucial because developmental language disorders are characterized specifically by difficulties in acquiring language due to inherent issues in language processing, not due to other external factors such as hearing loss or neurological impairments. When evaluating a child's language abilities, it is essential to consider these aspects to ensure that the language challenges are not a secondary effect of other conditions, such as auditory processing disorders or neurological disorders, which could affect communication skills. The other choices do not pertain to the diagnostic criteria of developmental language disorders. While mathematics skills, reading skills, and creativity may reflect other areas of cognitive development, they are not relevant to establishing whether a child has a developmental language disorder. The emphasis remains on ruling out hearing and neurological issues to confirm the diagnosis is solely related to language acquisition and processing.

9. Which of the following describes a common language error displayed by children?

- A. Using multiple pronouns correctly
- B. Omitting tense markers in speech**
- C. Maintaining conventional turn-taking rules
- D. Using complex grammatical structures

The choice highlighting the omission of tense markers in speech accurately reflects a common language error observed in children as they are developing their communication skills. Young children often simplify their language as they learn to construct sentences and communicate effectively. This simplification frequently results in the omission of grammatical elements that indicate tense, such as "ed" for past tense or "ing" for present continuous. For example, a child might say "I walk to the store" instead of "I walked to the store," showcasing that they may not yet fully grasp the rules around verb conjugation. Other options, while related to language use, do not accurately capture the typical errors made during language acquisition. For instance, using multiple pronouns correctly and maintaining conventional turn-taking rules are skills that tend to develop later in language structure and social communication. Similarly, children's use of complex grammatical structures often emerges as they grow older and refine their language abilities. These aspects typically indicate a more advanced understanding of language rather than a common error during the initial stages of language development.

10. Which sounds are critically directed into the nasal passages by lowering the velum?

A. Cereal sounds

B. Nasal sounds

C. Vowel sounds

D. Consonant sounds

Lowering the velum is a crucial action that allows airflow to pass into the nasal cavity, which is essential for the production of nasal sounds. These sounds, such as /m/, /n/, and /ŋ/ (as in 'sing'), require this open passage for resonance and articulation to occur properly. When the velum is lowered, it creates a coupling between the oral cavity and the nasal passages, enabling the distinct quality of nasal sounds. In contrast, other sounds—such as vowel sounds and various consonants—typically require the velum to be raised to direct airflow exclusively through the oral cavity for proper sound production. Thus, the act of lowering the velum is specifically associated with the generation of nasal sounds.

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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://asu-shs205final.examzify.com>

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

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