

Certified Medication Technician (CMT) Training 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. A suspension medication describes which form?**
 - A. Powder**
 - B. Liquid**
 - C. Pill**
 - D. Capsule**

- 2. There is a two-hour dosing window for seizure medications.**
 - A. True**
 - B. False**
 - C. Not sure**
 - D. Always**

- 3. A CMT is licensed by the Maryland board of Nursing to administer medications in Maryland.**
 - A. TRUE**
 - B. FALSE**
 - C. Not applicable**
 - D. Unknown**

- 4. Who should have access to the medication cabinet?**
 - A. The resident**
 - B. The CMT and nurse**
 - C. Family members**
 - D. Any staff with access**

- 5. Enteric-coated tablets must not be what?**
 - A. Crushed or mixed with foods**
 - B. Stored in a cool, dry place**
 - C. Taken with water**
 - D. Split into halves**

- 6. Which statement best describes the requirement for medications used to modify behavior?**
- A. They are optional in most settings**
 - B. They do not require documentation**
 - C. They can be used without a plan**
 - D. A behavioral plan is required for medications used to modify behavior**
- 7. How many times and when should you check the label of the medication before administering the medicine?**
- A. Three times: when removed from cabinet, during the three-way check, and after placing in the cup**
 - B. Twice**
 - C. Four times**
 - D. Once**
- 8. Which statement reflects the essential labeling requirement for OTC medications under the DDA policy?**
- A. Must be colored red**
 - B. Must have a prescription from a doctor.**
 - C. Must be accompanied by a patient consent form.**
 - D. Must have a PMOF and a pharmacy label**
- 9. Which factors influence a person's response to medication?**
- A. Height, eye color, hair color, ethnicity**
 - B. Age, weight, gender, physical condition**
 - C. Diet, sleep, exercise, mood**
 - D. Weather, season, time since waking**
- 10. Who obtains the medication from the pharmacy?**
- A. Nurse**
 - B. Pharmacist**
 - C. CMT**
 - D. Physician**

Answers

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

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Explanations

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1. A suspension medication describes which form?

- A. Powder
- B. Liquid**
- C. Pill
- D. Capsule

A suspension is a liquid dosage form in which finely divided drug particles are dispersed in a liquid vehicle. The drug isn't dissolved; instead, solid particles float in the liquid and may settle over time, so you typically shake the container before giving the dose to re-disperse the particles. This distinguishes it from powders, pills, or capsules, which are solid forms meant to be swallowed. Suspensions are used when the drug is not easily soluble in liquid, or when a liquid form is preferred for administration. So, the form described by a suspension medication is a liquid.

2. There is a two-hour dosing window for seizure medications.

- A. True
- B. False**
- C. Not sure
- D. Always

Timing matters with seizure medicines because maintaining steady drug levels helps prevent breakthrough seizures. There isn't a universal two-hour dosing window that applies to all seizure meds. Dosing schedules are set by the prescriber for each specific medication (often every 6-8 hours, 12 hours, or once daily). If a dose is missed, administer it as soon as you remember unless it's almost time for the next dose; never double-dose to catch up, since that can raise the risk of toxicity. Because schedules vary by drug, the idea of a fixed two-hour window isn't correct.

3. A CMT is licensed by the Maryland board of Nursing to administer medications in Maryland.

- A. TRUE
- B. FALSE**
- C. Not applicable
- D. Unknown

In Maryland, the authority to administer medications lies with licensed nurses, and the state board that licenses nurses does not issue a separate license for a Certified Medication Technician. A CMT may be trained to assist with medications, but they do not have independent licensing to administer meds. They work under the supervision of a licensed nurse (RN or LPN) and must follow facility policies and state regulations. So the statement that a CMT is licensed by the Maryland Board of Nursing to administer medications is not accurate.

4. Who should have access to the medication cabinet?

- A. The resident
- B. The CMT and nurse**
- C. Family members
- D. Any staff with access

Access to the medication cabinet must be restricted to people who are trained and authorized to handle medications. This ensures meds are stored securely, identified correctly, and given to the right patient at the right time with proper documentation and checks. A Certified Medication Technician and a nurse are the trained personnel who routinely prepare, verify, and administer medications, following procedures like the five rights and facility policies. They understand when a medication should be given, how to verify orders, and how to record administration, which is why they are the appropriate people to have access. Residents should not have access to the cabinet because it poses safety risks and can compromise medication accuracy and privacy. Family members should also not access meds for similar reasons. Allowing any staff with access who are not trained or authorized would increase the chance of errors, misuse, or confidentiality breaches.

5. Enteric-coated tablets must not be what?

- A. Crushed or mixed with foods**
- B. Stored in a cool, dry place
- C. Taken with water
- D. Split into halves

Enteric-coated tablets are designed to pass through the stomach intact and dissolve in the small intestine. Crushing them or mixing them with foods damages that protective coating, causing the drug to release early in the stomach. This can irritate the stomach lining, alter absorption, and reduce effectiveness. So they must not be crushed or mixed with foods. Swallow them whole with water and store them as directed. Splitting the tablet would also risk breaking the coating, but the primary reason is to keep the coating intact to ensure proper release.

6. Which statement best describes the requirement for medications used to modify behavior?

- A. They are optional in most settings
- B. They do not require documentation
- C. They can be used without a plan
- D. A behavioral plan is required for medications used to modify behavior**

Medications used to modify behavior must be guided by a formal, written plan that specifies the behaviors targeted, the reason for pharmacologic treatment, and how progress and safety will be measured. This plan links the medication to specific behavioral goals, outlines data collection to assess effectiveness, and sets criteria for continuing, adjusting, or stopping the medication. It also coordinates nonpharmacologic strategies, ensures informed consent, and establishes monitoring for side effects with regular reviews. Because this structured approach ensures safe, purposeful use and protects the person's rights, a behavioral plan is required. The other options suggest there's no need for planning, documentation, or a plan, which could lead to inappropriate or unsafe use.

7. How many times and when should you check the label of the medication before administering the medicine?

A. Three times: when removed from cabinet, during the three-way check, and after placing in the cup

B. Twice

C. Four times

D. Once

Checking the medication label at multiple moments is a safety practice to prevent errors. In this approach, you verify the label when you first remove the item from storage, again while you are preparing or pouring it, and a final time right before you administer it at the bedside. Each check confirms that the drug name, strength, form, and expiration match the order and the patient's MAR, and also confirms you're using the correct patient's medication. This layered verification catches mistakes such as grabbing the wrong drug, misreading a label, or mixing up doses. Only checking once or twice or only after administering would miss potential mismatches, so this three-point process is the standard safeguard.

8. Which statement reflects the essential labeling requirement for OTC medications under the DDA policy?

A. Must be colored red

B. Must have a prescription from a doctor.

C. Must be accompanied by a patient consent form.

D. Must have a PMOF and a pharmacy label

OTC medications must be clearly labeled and traceable so the patient can use them safely and the pharmacy can track every dispensing event. The essential requirement is that the product carries both a pharmacy label and a PMOF. The pharmacy label provides the patient-focused information they need—drug name, strength, directions for use, warnings, and storage details—so the person taking it knows exactly how to take it and what to watch for. The PMOF is the internal documentation that links the dispensed product to the patient record, including lot or expiration details and the dispense date, ensuring proper accountability and traceability within the pharmacy system. Together, they ensure correct product identification, instructions, and record-keeping under the DDA policy. Color alone, a prescription from a doctor, or a patient consent form are not part of the standard labeling requirement for OTC medications in this context.

9. Which factors influence a person's response to medication?

- A. Height, eye color, hair color, ethnicity
- B. Age, weight, gender, physical condition**
- C. Diet, sleep, exercise, mood
- D. Weather, season, time since waking

Medication response varies between people because individual bodies handle drugs differently, influencing how a drug is absorbed, distributed, metabolized, and excreted, as well as how strongly a person responds to it. The factors that most impact this are age, weight, gender, and overall physical condition. Age changes how organs function and how quickly drugs are processed—children may require different dosing than adults, and older adults often metabolize drugs more slowly or have reduced kidney function. Weight affects the amount of drug needed to reach a therapeutic level and how widely the drug distributes in the body. Gender can influence drug effects through differences in body composition, hormone levels, and enzyme activity, which can alter both how a drug is processed and its impact. Physical condition, including liver and kidney health and the presence of other illnesses, shapes metabolism and excretion, changing both the drug's duration and intensity of action. Other factors like height, eye color, hair color, or ethnicity aren't routinely used to guide dosing in everyday practice, though certain genetic or cultural considerations can matter for specific drugs. Diet, sleep, exercise, and mood can have secondary effects, such as altering absorption or adherence, but they are not primary determinants of how a drug works. Weather, season, or time since waking don't directly determine a drug's effect. So, age, weight, gender, and physical condition best explain why different people may respond differently to the same medication.

10. Who obtains the medication from the pharmacy?

- A. Nurse
- B. Pharmacist
- C. CMT**
- D. Physician

Obtaining medications from the pharmacy is a step in the medication administration process that falls within the responsibilities of a Certified Medication Technician in many training programs. The CMT is trained to handle meds at the point of care, which includes retrieving the prescribed medication from the pharmacy (or the facility's dispensing area), verifying it against the prescription and MAR, and preparing it for administration under the facility's policies and supervision. This role ensures the medication comes from the pharmacy with proper labeling and documentation before it's given to the resident. Pharmacists dispense and label medications to the facility and are responsible for safety and accuracy at the pharmacy itself. Physicians prescribe the medications. Nurses typically administer medications and may handle them in some settings, but the exam scenario emphasizes that, in this context, the person who obtains the medication from the pharmacy is the CMT. In real-world practice, workflows can vary by facility and jurisdiction, but this is the role highlighted in this question.

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://cmtraining.examzify.com>

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

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