

Certified Ophthalmic Assistant Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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SAMPLE

Questions

SAMPLE

- 1. What color is the light filter used in applanation tonometry?**
 - A. Green**
 - B. Blue**
 - C. Yellow**
 - D. Red**
- 2. Interferometer is used to test a patient's**
 - A. Eye pressure**
 - B. Field of vision**
 - C. Retinal health**
 - D. Potential acuity**
- 3. Starting with plan in retinoscopy, a "with" reflex is most commonly observed in which refractive error?**
 - A. myopia**
 - B. hyperopia**
 - C. astigmatism**
 - D. presbyopia**
- 4. According to universal precautions, which equipment should be sterilized before each patient use?**
 - A. Instruments touching intact skin**
 - B. Respiratory devices**
 - C. Computers in the office**
 - D. Office furniture**
- 5. What is the term for the process by which the eyes adjust from near to distance vision?**
 - A. Accommodation**
 - B. Astigmatism**
 - C. Myopia**
 - D. Presbyopia**

- 6. The instrument that measures the curvature of the central part of the cornea is the**
- A. Keratometer**
 - B. Lensmeter**
 - C. Phoropter**
 - D. Ophthalmoscope**
- 7. What type of perimetry technique involves a moving target?**
- A. Confrontation testing**
 - B. Goldmann perimetry**
 - C. Kinetic perimetry**
 - D. Static perimetry**
- 8. Which eye drop paralyzes accommodation and thereby allows all of the hyperopia to be uncovered?**
- A. Atropine**
 - B. Cyclopentolate**
 - C. Phenylephrine**
 - D. Tropicamide**
- 9. What is the measurement used to determine the distance between the optical centers of spectacle lenses?**
- A. Pupil size**
 - B. Bridge width**
 - C. Lens thickness**
 - D. Pupillary distance**
- 10. If a patient is unable to distinguish the largest letter on a Snellen chart, the assistant should**
- A. proceed to the next line**
 - B. check for color blindness**
 - C. determine if the patient can find fingers at a given distance**
 - D. change the chart**

Answers

SAMPLE

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

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Explanations

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1. What color is the light filter used in applanation tonometry?

- A. Green
- B. Blue**
- C. Yellow
- D. Red

The light filter used in applanation tonometry is typically blue in color. This specific color helps enhance the visibility of the fluorescein dye that is used during the procedure. The blue filter allows for better contrast and visibility of the corneal surface, which is crucial for accurately measuring the intraocular pressure.

2. Interferometer is used to test a patient's

- A. Eye pressure
- B. Field of vision
- C. Retinal health
- D. Potential acuity**

An interferometer is a device that is used to measure the potential visual acuity of a patient. It is commonly utilized in ophthalmic practice to assess the patient's ability to see fine details and determine their potential vision with or without correction. Through the interference patterns created by the light passing through the device, the interferometer can help in evaluating the patient's visual acuity accurately. Eye pressure, field of vision, and retinal health are important aspects of a comprehensive eye examination, but they are not typically assessed using an interferometer. Instead, these parameters are evaluated through specific tests such as tonometry for measuring intraocular pressure, perimetry for assessing the visual field, and various imaging techniques for evaluating retinal health.

3. Starting with plan in retinoscopy, a "with" reflex is most commonly observed in which refractive error?

- A. myopia
- B. hyperopia**
- C. astigmatism
- D. presbyopia

In retinoscopy, when we observe a "with" reflex, it indicates a hyperopic refractive error. With hyperopia, the light is focused behind the retina, causing the retinoscopic reflex to move in the same direction as the movement of the retinoscope streak. This results in a "with" motion as opposed to a "against" motion which is typically seen in myopia where the light is focused in front of the retina. Astigmatism and presbyopia are conditions that can coexist with myopia or hyperopia, but they are not specifically associated with a "with" reflex in retinoscopy.

4. According to universal precautions, which equipment should be sterilized before each patient use?

A. Instruments touching intact skin

B. Respiratory devices

C. Computers in the office

D. Office furniture

According to universal precautions, equipment that touches intact skin, such as instruments used for examination or treatment, should be sterilized before each patient use. This is crucial to prevent the transmission of infections between patients. Sterilization of these instruments helps maintain a safe and hygienic environment in the ophthalmic practice. Options B, C, and D are not required to be sterilized before each patient use according to universal precautions. While respiratory devices should be cleaned and disinfected between patients, computers in the office should be cleaned regularly but not necessarily sterilized before each use. Similarly, office furniture does not need to be sterilized before each patient encounter.

5. What is the term for the process by which the eyes adjust from near to distance vision?

A. Accommodation

B. Astigmatism

C. Myopia

D. Presbyopia

The correct answer is "A. Accommodation." Accommodation is the process by which the eyes adjust their focus from near to distance vision and vice versa. This adjustment is made possible by changes in the shape of the lens inside the eye to ensure that light rays are properly focused on the retina, allowing clear vision at different distances. Option B, "Astigmatism," refers to a refractive error caused by an irregularly shaped cornea or lens that leads to distorted or blurred vision at all distances. Option C, "Myopia," is also known as nearsightedness, a condition where close objects can be seen clearly while distant objects appear blurry. Option D, "Presbyopia," is an age-related condition where the eyes gradually lose the ability to focus on close objects due to the natural hardening of the lens, typically occurring around middle to old age.

6. The instrument that measures the curvature of the central part of the cornea is the

A. Keratometer

B. Lensmeter

C. Phoropter

D. Ophthalmoscope

The keratometer is the instrument most commonly used by optometrists and ophthalmologists to measure the curvature of the cornea, which is the clear, dome-shaped surface that covers the front of the eye. This measurement is important in determining the proper fit for contact lenses and diagnosing certain eye conditions. Option B, the Lensmeter, is used to measure the power and prescription of glasses lenses, not the curvature of the cornea. Option C, the Phoropter, is used to determine an individual's refractive error and determine the right prescription for glasses or contact lenses, but it does not directly measure the curvature of the cornea. Option D, the Ophthalmoscope, is used to examine the internal structures of the eye, such as the retina and optic nerve, and is not used to measure the curvature of the cornea.

7. What type of perimetry technique involves a moving target?

A. Confrontation testing

B. Goldmann perimetry

C. Kinetic perimetry

D. Static perimetry

Kinetic perimetry is the type of perimetry technique that involves a moving target. In kinetic perimetry, the examiner manually moves a stimulus (such as a light) towards the patient's field of vision until the patient sees the stimulus and signals its detection. This type of perimetry is particularly useful in detecting the boundaries of the visual field and is often used in conditions such as glaucoma where peripheral vision loss may occur. Confrontation testing (Option A) involves the examiner comparing the patient's visual field to their own, without the use of a moving target. Goldmann perimetry (Option B) is a type of kinetic perimetry where the examiner manually moves a target of varying size and intensity to map the visual field. Static perimetry (Option D) involves presenting static stimuli at fixed locations in the visual field without movement of the target.

8. Which eye drop paralyzes accommodation and thereby allows all of the hyperopia to be uncovered?

- A. Atropine**
- B. Cyclopentolate**
- C. Phenylephrine**
- D. Tropicamide**

The eye drop that paralyzes accommodation, thereby allowing all of the hyperopia to be uncovered, is Atropine. Atropine is an anticholinergic agent that works by blocking the action of acetylcholine on the iris sphincter and ciliary body muscles. This results in a paralysis of accommodation, which is the eye's ability to focus on near objects. When accommodation is paralyzed, it allows for a more accurate assessment of refractive errors, particularly hyperopia (farsightedness). This is because, in a hyperopic patient, the eye has to exert effort to focus on near objects. By using Atropine, the need for this effort is removed, thus revealing the full extent of hyperopia during the examination. Although other drops like Cyclopentolate, Tropicamide, and Phenylephrine are also used to induce mydriasis or to facilitate examination of the eye, they have shorter durations of action and may not fully paralyze accommodation to the same extent as Atropine. Cyclopentolate, for instance, is commonly used and does induce cycloplegia but is less effective than Atropine for long-term accommodation paralysis. Tropicamide is primarily used for dilating pupils and

9. What is the measurement used to determine the distance between the optical centers of spectacle lenses?

- A. Pupil size**
- B. Bridge width**
- C. Lens thickness**
- D. Pupillary distance**

Pupillary distance is the measurement used to determine the distance between the optical centers of spectacle lenses. It is crucial to ensure that the lenses are aligned properly with the patient's eyes to provide optimal visual acuity and comfort. The other options: A. Pupil size: While pupil size is important for certain measurements like determining appropriate frame size in relation to the pupil center, it is not specifically used for determining the distance between optical centers of spectacle lenses. B. Bridge width: Bridge width is the measurement of the distance between the two lenses at the bridge of the nose. It is not directly related to the distance between the optical centers of the lenses. C. Lens thickness: Lens thickness is relevant for lens design and prescription, but it does not determine the distance between the optical centers of spectacle lenses. Therefore, the correct answer is D.

10. If a patient is unable to distinguish the largest letter on a Snellen chart, the assistant should

A. proceed to the next line

B. check for color blindness

C. determine if the patient can found fingers at a given distance

D. change the chart

If a patient cannot distinguish the largest letter on a Snellen chart, determining whether the patient can see fingers at a given distance is an appropriate next step. This method, known as "finger-counting," is used when visual acuity is very poor, and it helps assess the patient's vision more accurately than the Snellen chart when standard letters cannot be seen. This approach is particularly useful in cases of severe visual impairment, as it allows the assistant to gauge the patient's vision at a closer range, providing valuable information for the practitioner regarding the patient's current visual capabilities. The other options may not provide useful data in situations where visual acuity is already very limited. For example, checking for color blindness is irrelevant if the patient cannot see letters; similarly, proceeding to the next line does not yield valuable information when the largest letters are not distinguishable. Changing the chart could be unhelpful as it does not address the root issue of the patient's inability to perceive larger characters.