

COA Ophthalmic Tech Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of questions,

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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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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!

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Questions

- 1. What visual condition is characterized by the inability to focus on nearby objects?**
 - A. Myopia**
 - B. Presbyopia**
 - C. Astigmatism**
 - D. Hyperopia**
- 2. Which of the following tests might be administered before a glare test?**
 - A. Visual Acuity Test**
 - B. Pupil Response Test**
 - C. Optical Coherence Tomography**
 - D. Color Vision Test**
- 3. Which of the following is NOT a typical symptom of cataracts?**
 - A. Blurred vision**
 - B. Increased glare sensitivity**
 - C. Loss of peripheral vision**
 - D. Double vision**
- 4. Who typically administers ophthalmic drug injections?**
 - A. Registered nurse or doctor**
 - B. Optometrist or technician**
 - C. Pharmacist**
 - D. Physician assistant**
- 5. Diabetes mellitus is classified as what type of disease process?**
 - A. Autoimmune**
 - B. Cardiovascular**
 - C. Metabolic**
 - D. Neurological**

- 6. If a patient is suffering from monocular diplopia, what is true about their vision?**
- A. They will always be myopic as well**
 - B. Covering one eye will eliminate the double vision**
 - C. Double vision will persist when one eye is covered**
 - D. They will have above-average eyesight**
- 7. What instrument is used to measure proptosis or exophthalmos in millimeters?**
- A. Ophthalmoscope**
 - B. Exophthalmometer**
 - C. Retinoscope**
 - D. Tonometry**
- 8. The mannerisms of blind children, such as walking in circles or rubbing their hands, are termed?**
- A. Eye-hand coordination**
 - B. Blindisms**
 - C. Social cues**
 - D. Mobility techniques**
- 9. Which disease is characterized as a chronic autoimmune condition affecting nerve transmission in skeletal muscles?**
- A. Multiple Sclerosis**
 - B. Myasthenia Gravis**
 - C. Amyotrophic Lateral Sclerosis**
 - D. Guillain-Barré Syndrome**
- 10. For accurate perimetry, what must be considered for a patient with presbyopia?**
- A. Visual acuity level**
 - B. Intraocular lens type**
 - C. Near correction**
 - D. Age-related changes**

Answers

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

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Explanations

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1. What visual condition is characterized by the inability to focus on nearby objects?

A. Myopia

B. Presbyopia

C. Astigmatism

D. Hyperopia

The visual condition characterized by the inability to focus on nearby objects is presbyopia. This condition typically arises as a natural part of aging and involves the gradual loss of the eye's ability to change focus from distant to near objects, largely due to the hardening of the lens and the weakening of the ciliary muscles that control lens shape. As a person ages, the lens becomes less flexible, making it difficult to accommodate for near vision tasks, such as reading or sewing. This is why individuals with presbyopia might find themselves needing reading glasses or bifocals to correct their vision for close-up tasks. Other options involve different visual issues: myopia is the inability to see distant objects clearly; astigmatism is caused by an irregular shape of the cornea or lens, leading to blurred vision at any distance; and hyperopia refers to the difficulty focusing on close objects but does not necessarily present the same age-related loss of near vision as presbyopia, since it is more related to the eye's shape or refractive errors. Understanding these distinctions helps clarify why presbyopia specifically relates to near vision difficulties, particularly as individuals age.

2. Which of the following tests might be administered before a glare test?

A. Visual Acuity Test

B. Pupil Response Test

C. Optical Coherence Tomography

D. Color Vision Test

A visual acuity test is often administered before a glare test because it establishes the baseline for the patient's vision. This initial assessment measures how well the patient can see at various distances, providing crucial information about their current level of vision without any additional factors influencing the results, such as glare. By conducting the visual acuity test first, the practitioner can ensure that any changes in visual performance noted during the glare test are not due to pre-existing visual deficits but rather the effects of glare itself. This systematic approach helps in accurately diagnosing any glare-related vision issues and understanding how they impact the patient's overall visual function. Other tests, while valuable in their own right, do not serve the same purpose as a baseline assessment. The pupil response test evaluates how the pupils react to light, which is not directly related to visual acuity. Optical coherence tomography is an imaging test used for detailed examination of the retina, and the color vision test assesses the ability to distinguish colors, neither of which directly measure the overall clarity of vision or its performance under glare conditions.

3. Which of the following is NOT a typical symptom of cataracts?

- A. Blurred vision**
- B. Increased glare sensitivity**
- C. Loss of peripheral vision**
- D. Double vision**

The correct answer, which identifies a symptom that is not typically associated with cataracts, is the loss of peripheral vision. Cataracts primarily affect the clarity of the lens in the eye, causing symptoms such as blurred vision, increased glare sensitivity, and, in some cases, double vision. Blurred vision occurs as the clouding of the lens interferes with the passage of light, leading to a decrease in visual sharpness. Increased glare sensitivity is also common since cataracts scatter light, making it difficult for individuals to see clearly in bright or poorly lit environments. Double vision can arise when cataracts distort the light entering the eye; this can disrupt the brain's ability to merge images from both eyes, leading to the perception of two images. In contrast, loss of peripheral vision is more characteristic of other eye conditions, such as glaucoma or retinal diseases, rather than cataracts. Cataracts mainly affect central vision instead, highlighting why the loss of peripheral vision is not a typical symptom associated with this condition.

4. Who typically administers ophthalmic drug injections?

- A. Registered nurse or doctor**
- B. Optometrist or technician**
- C. Pharmacist**
- D. Physician assistant**

Ophthalmic drug injections are typically administered by a registered nurse or a doctor. This is due to the specialized training and qualifications required to perform such procedures safely and effectively. Registered nurses and doctors are trained in the anatomy and physiology of the eye and have the necessary skills to manage the injection process, including preparing the medication, maintaining sterility, and monitoring the patient for any adverse reactions post-injection. While optometrists can also administer certain eye injections, they are not always part of the typical reference for general injection procedures in ophthalmology, as those practices more commonly associate injections with medical doctors or licensed nurses. Technicians usually support in other capacities but do not usually have the legal authority or training to administer injections. Pharmacists generally handle the dispensing and management of medications but do not administer injections directly to patients in this context. Physician assistants may be involved in various medical procedures, but in this specific context, the administration of ophthalmic drug injections primarily emphasizes the roles of registered nurses and doctors, underscoring their established training and clinical responsibilities in such settings.

5. Diabetes mellitus is classified as what type of disease process?

- A. Autoimmune**
- B. Cardiovascular**
- C. Metabolic**
- D. Neurological**

Diabetes mellitus is classified as a metabolic disease primarily because it involves the body's ability to produce or utilize insulin effectively, which directly affects glucose metabolism. In healthy individuals, insulin regulates blood glucose levels by allowing glucose to enter cells for energy or storage. However, in diabetes mellitus, this process is disrupted, leading to elevated glucose levels in the bloodstream. The classification of diabetes as a metabolic disorder encompasses both types: Type 1 diabetes, which is an autoimmune process where the body's immune system attacks insulin-producing beta cells in the pancreas, and Type 2 diabetes, which is characterized by insulin resistance and relative insulin deficiency. Both conditions significantly impair the regulation of metabolic processes, particularly those related to carbohydrates, fats, and proteins. Understanding diabetes as a metabolic disorder also helps healthcare professionals focus on related complications, such as cardiovascular diseases, neuropathies, and other metabolic syndrome components that can arise from poor glucose control over time. This understanding is crucial for effective patient management and the development of treatment strategies aimed at improving metabolic health.

6. If a patient is suffering from monocular diplopia, what is true about their vision?

- A. They will always be myopic as well**
- B. Covering one eye will eliminate the double vision**
- C. Double vision will persist when one eye is covered**
- D. They will have above-average eyesight**

Monocular diplopia, or double vision in one eye, occurs when the same eye perceives two images of a single object. This phenomenon is often due to issues related to the cornea, lens, or retinal abnormalities, rather than problems involving alignment between the two eyes that would typically be addressed through covering one eye. When one eye is covered in a case of monocular diplopia, the double vision will persist because the underlying cause is within the affected eye itself. This means that if the patient covers the eye with the diplopia, they would still perceive the double vision as the problem exists in the functioning of that single eye. The other choices suggest circumstances that do not apply to monocular diplopia. For instance, not all patients with monocular diplopia experience the same refractive errors, and covering one eye certainly will not eliminate the problem. Therefore, the hallmark of monocular diplopia lies in its independence from the status of the other eye, leading to the conclusion that the correct response is to indicate that double vision persists when covering the affected eye.

7. What instrument is used to measure proptosis or exophthalmos in millimeters?

A. Ophthalmoscope

B. Exophthalmometer

C. Retinoscope

D. Tonometry

The instrument specifically designed to measure proptosis or exophthalmos is known as the exophthalmometer. This tool is essential in assessing the degree of bulging of the eye, which can be an important indicator of various ocular conditions, such as Graves' disease or other thyroid-related disorders. The exophthalmometer typically features a scale that allows the clinician to take precise measurements in millimeters, which helps in diagnosing and monitoring conditions that lead to eye prominence. By positioning the device in front of the patient's eyes, the clinician can gauge the distance the eye protrudes from the orbital rim, providing valuable data for clinical evaluation. Other instruments listed, such as the ophthalmoscope, are primarily used for examining the interior structures of the eye; retinoscopes are utilized in refraction to determine a patient's prescription for glasses; and tonometry is focused on measuring intraocular pressure. While all these tools are important in ophthalmology, none are designed for the specific purpose of measuring proptosis as accurately as the exophthalmometer.

8. The mannerisms of blind children, such as walking in circles or rubbing their hands, are termed?

A. Eye-hand coordination

B. Blindisms

C. Social cues

D. Mobility techniques

The term "blindisms" refers specifically to the stereotypic behaviors often observed in children who are blind or visually impaired. These behaviors can include actions such as walking in circles, hand rubbing or flapping, and other repetitive movements. Blindisms arise as a way for these individuals to express themselves or cope with their environment, often compensating for the lack of visual input. These behaviors may serve various purposes, such as providing sensory feedback, helping the individual to relax, or simply making them feel more secure. It's important to recognize that such behaviors are typically not harmful and are a natural response to their unique sensory experiences. Understanding blindisms can assist caregivers and educators in creating supportive environments that accommodate these behaviors while also promoting functional skills and social interaction. In contrast, the other options do not appropriately describe these specific behaviors observed in blind children.

9. Which disease is characterized as a chronic autoimmune condition affecting nerve transmission in skeletal muscles?

- A. Multiple Sclerosis**
- B. Myasthenia Gravis**
- C. Amyotrophic Lateral Sclerosis**
- D. Guillain-Barré Syndrome**

Myasthenia Gravis is a chronic autoimmune condition that specifically targets the communication between nerves and muscles, leading to muscle weakness. This condition is caused by antibodies that block or destroy nicotinic acetylcholine receptors at the neuromuscular junction, which impairs the nerve signals that stimulate muscle contractions. As a result, individuals with Myasthenia Gravis typically experience an increase in muscle weakness with activity, which can improve with rest. The focus on nerve transmission to skeletal muscles is key to understanding this condition, distinguishing it from others, such as Multiple Sclerosis, which affects the central nervous system and can impact various physical functions, or Guillain-Barré Syndrome, which is characterized by rapid-onset muscle weakness due to the immune system attacking peripheral nerves. Amyotrophic Lateral Sclerosis also affects muscle control but does not primarily involve the same autoimmune mechanism affecting the neuromuscular junction as seen in Myasthenia Gravis. Thus, Myasthenia Gravis accurately describes the chronic autoimmune disruption of nerve transmission to skeletal muscles.

10. For accurate perimetry, what must be considered for a patient with presbyopia?

- A. Visual acuity level**
- B. Intraocular lens type**
- C. Near correction**
- D. Age-related changes**

In perimetry, which assesses the visual field and helps identify any defects in vision, consideration of near correction is essential for patients with presbyopia. Presbyopia is a common age-related condition that results in a decreased ability to focus on close objects due to the hardening of the lens inside the eye. When performing perimetry on presbyopic patients, it's crucial to ensure that they have the appropriate near vision correction. This is because their ability to accurately see and respond to visual stimuli in the periphery is impacted if they are not wearing their prescribed near correction, such as reading glasses or multifocal lenses. If the correction is not accounted for, the results may be inaccurate, potentially leading to misdiagnosis or mismanagement of visual field defects. While factors such as visual acuity level, intraocular lens type, and age-related changes do play roles in overall visual function, the immediate necessity of having the correct near correction is paramount in obtaining reliable perimetry results in presbyopic individuals. This tailored approach ensures that the patient can effectively perceive and respond during the test, leading to more precise outcomes.

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://coaophthalmictech.examzify.com>

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