

# COA Ophthalmic Tech Practice Exam (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. Onset and duration of symptoms is included in the patient's?**
  - A. Medical history**
  - B. Review of systems**
  - C. History of present illness (HPI)**
  - D. Family history**
  
- 2. What is the purpose of the slit beam in anterior chamber depth estimation?**
  - A. To enhance color perception**
  - B. To measure corneal density**
  - C. To obtain an optical section**
  - D. To evaluate refractive errors**
  
- 3. Which structures are included in the adnexa of the eye?**
  - A. Cornea, retina, conjunctiva, and lens**
  - B. Orbit, extraocular muscles, eyelids, and lacrimal apparatus**
  - C. Pupil, iris, sclera, and vitreous body**
  - D. Optic nerve, choroid, ciliary body, and aqueous humor**
  
- 4. What is a common symptom associated with glaucoma?**
  - A. Pain in the eye**
  - B. Blurred vision**
  - C. Seeing halos around lights**
  - D. All of the above**
  
- 5. Which of the following are examples of static perimetry?**
  - A. Kinetic perimetry and dynamic perimetry**
  - B. Threshold perimetry and suprathreshold perimetry**
  - C. Visual acuity testing and refractive error analysis**
  - D. Contrast sensitivity and color vision tests**

- 6. Exophthalmos is most commonly associated with which medical condition?**
- A. Thyroid disease**
  - B. Cataracts**
  - C. Glaucoma**
  - D. Diabetic retinopathy**
- 7. What is a common effect of eye drop preservatives that patients might experience?**
- A. Improved vision**
  - B. Eye irritation**
  - C. Better comfort**
  - D. No effects**
- 8. What is a cataract?**
- A. An opacification of the crystalline lens**
  - B. A thickening of the cornea**
  - C. A condition affecting the optic nerve**
  - D. A type of eye infection**
- 9. What color defects may be distinguished by the Ishihara test?**
- A. Blue and yellow**
  - B. Red and green**
  - C. Red and blue**
  - D. Green and yellow**
- 10. Where does the Medial Canthus occur in relation to the eyelids?**
- A. At the top of the eyelids**
  - B. At the temporal side of the eyes**
  - C. On the nasal (inner) side of the palpebral fissure**
  - D. At the bottom of the eye socket**

## Answers

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

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## **Explanations**

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**1. Onset and duration of symptoms is included in the patient's?**

- A. Medical history**
- B. Review of systems**
- C. History of present illness (HPI)**
- D. Family history**

The onset and duration of symptoms are fundamental components of the history of present illness (HPI). The HPI provides a detailed account of the patient's current health issue, including the timeline of when symptoms began, how they have progressed, and their duration. This information is crucial for the healthcare provider to understand the nature and severity of the patient's complaint, aiding in diagnosis and treatment planning. The HPI typically outlines specifics about the patient's symptoms, such as their onset, duration, intensity, and any factors that may alleviate or exacerbate the symptoms. This detailed narrative helps create a complete picture of the patient's condition as it relates to their present complaint. In contrast, medical history encompasses a broader view of the patient's overall health, including past medical, surgical, and social history. The review of systems is a systematic approach to identifying any additional issues across various body systems, but it doesn't dive into the specifics of the current illness. Family history focuses on hereditary health conditions and illnesses that may affect the patient's health but does not pertain specifically to the present complaint.

**2. What is the purpose of the slit beam in anterior chamber depth estimation?**

- A. To enhance color perception**
- B. To measure corneal density**
- C. To obtain an optical section**
- D. To evaluate refractive errors**

The purpose of the slit beam in anterior chamber depth estimation is to obtain an optical section. An optical section refers to a thin slice or cross-sectional view of the eye structures, which allows for a detailed examination of the anterior chamber. By using a beam of light that is narrow and focused, the slit lamp can create a clear and precise cross-section of the eye's anatomy. This technique is crucial for assessing the depth of the anterior chamber, identifying any potential issues such as shallow anterior chambers, which can be associated with increased risk for conditions like angle-closure glaucoma. The clarity and precision of the optical section made possible by the slit beam enable ophthalmic professionals to make informed diagnoses and treatment decisions. In contrast, enhancing color perception, measuring corneal density, and evaluating refractive errors do not specifically involve the use of a slit beam for the purpose of assessing anterior chamber depth. Each of these functions pertains to different diagnostic techniques and tools that serve various aspects of ocular health assessment.

### 3. Which structures are included in the adnexa of the eye?

- A. Cornea, retina, conjunctiva, and lens
- B. Orbit, extraocular muscles, eyelids, and lacrimal apparatus**
- C. Pupil, iris, sclera, and vitreous body
- D. Optic nerve, choroid, ciliary body, and aqueous humor

The adnexa of the eye refers to the accessory structures that support and protect the eyeball itself. This includes components that are critical for the eye's function but are not part of the eye's globe. The correct option encompasses the orbit, extraocular muscles, eyelids, and lacrimal apparatus, all of which fall under the categorization of adnexal structures. The orbit houses the eyeball and contains the structures that support the eye, such as the extraocular muscles that control eye movement. The eyelids function to protect the eye and help distribute tears across the surface. The lacrimal apparatus is essential for tear production and drainage, maintaining the moisture necessary for eye health. Collectively, these components work synergistically to ensure optimal visual function and protection of the eye. In contrast, the other choices list structures that are primarily parts of the eye itself or related to its internal functions. For instance, the cornea, retina, conjunctiva, and lens are all integral components of the eye's globe without being part of the adnexal structures, and the pupil, iris, sclera, and vitreous body relate to the internal anatomy and function of the eye rather than its supporting framework. The optic nerve, choroid,

### 4. What is a common symptom associated with glaucoma?

- A. Pain in the eye
- B. Blurred vision
- C. Seeing halos around lights
- D. All of the above**

Glaucoma is a group of eye diseases that lead to damage of the optic nerve, often associated with increased intraocular pressure. The condition can manifest a range of symptoms, which can vary depending on the type and stage of glaucoma. Seeing halos around lights is a notable symptom particularly associated with acute angle-closure glaucoma, where elevated eye pressure can cause visual disturbances due to the cornea's inability to properly refract light. Blurred vision can occur as the optic nerve deteriorates over time, affecting visual clarity. Some patients may also experience pain in the eye during acute episodes, particularly in the case of angle-closure glaucoma, where there is a sudden spike in intraocular pressure. Since all these symptoms—pain in the eye, blurred vision, and seeing halos around lights—can occur in different types or stages of glaucoma, the option that encapsulates all these experiences is the most comprehensive and accurate choice. This collective consideration helps highlight the multifaceted nature of glaucoma and illustrates why a patient may report varying symptoms based on their specific situation with the disease.

**5. Which of the following are examples of static perimetry?**

- A. Kinetic perimetry and dynamic perimetry**
- B. Threshold perimetry and suprathreshold perimetry**
- C. Visual acuity testing and refractive error analysis**
- D. Contrast sensitivity and color vision tests**

Static perimetry is a type of visual field testing that measures the sensitivity of vision at specific fixed points within the visual field, typically used to assess central vision and detect issues like glaucoma. The methods of threshold perimetry and suprathreshold perimetry fall under this category. In threshold perimetry, the minimum intensity of light that a patient can perceive at various points in their visual field is determined, allowing for detailed mapping of sensitivity. Suprathreshold perimetry, on the other hand, uses a brighter light stimulus that is above the patient's threshold sensitivity, providing a quicker assessment of the visual field without mapping the exact threshold levels. These methodologies are integral in ophthalmology for diagnosing and monitoring conditions that can affect peripheral vision and overall visual field, making them quintessential examples of static perimetry. In contrast, other mentioned options focus on different types of visual assessment or perimetry, which do not classify as static perimetry. They serve different purposes in eye exams and vision evaluation but do not fit within the static perimetry framework.

**6. Exophthalmos is most commonly associated with which medical condition?**

- A. Thyroid disease**
- B. Cataracts**
- C. Glaucoma**
- D. Diabetic retinopathy**

Exophthalmos, also known as proptosis, refers to the abnormal protrusion of the eyeball and is most commonly associated with thyroid disease, particularly Graves' disease. This autoimmune condition leads to hyperthyroidism and often results in inflammation and swelling of the muscles and tissues around the eyes, causing them to bulge forward. In Graves' disease, the immune system mistakenly attacks the thyroid gland, leading to an excess production of thyroid hormones. The same immune process can affect the orbit, the bony cavity that houses the eye, causing the infiltration of immune cells and subsequent edema (swelling). This is often seen in conjunction with other symptoms of hyperthyroidism but is particularly notable for its impact on the eyes. Understanding this association is crucial for recognizing the systemic implications of thyroid disease and the need for comprehensive management that may involve endocrinologists and ophthalmologists. The other conditions listed do not typically lead to exophthalmos and are understood within different contexts related to visual impairment or eye health.

**7. What is a common effect of eye drop preservatives that patients might experience?**

- A. Improved vision**
- B. Eye irritation**
- C. Better comfort**
- D. No effects**

Eye drop preservatives are often used to prolong the shelf life of the medication and prevent microbial growth. However, a common effect that many patients experience is eye irritation. This irritation can manifest as redness, itching, burning, or a gritty sensation in the eyes. Preservatives are typically added to multi-dose eye drop bottles but can be harmful to the ocular surface and lead to adverse reactions, especially with long-term use. Patients with conditions requiring frequent instillation of eye drops may particularly notice these effects. In cases where a preservative is causing discomfort, healthcare providers may suggest preservative-free formulations, which have been shown to reduce irritation and improve patient compliance with their treatment regimens.

**8. What is a cataract?**

- A. An opacification of the crystalline lens**
- B. A thickening of the cornea**
- C. A condition affecting the optic nerve**
- D. A type of eye infection**

A cataract is defined as an opacification of the crystalline lens of the eye. This condition occurs when the normally clear lens becomes cloudy or opaque, which can lead to blurred vision and other visual disturbances. The crystalline lens is responsible for focusing light onto the retina, so any clouding can significantly impact visual clarity. Cataracts can develop as a result of aging, injury, or other factors, and are commonly associated with numerous visual impairments. Treatment typically involves surgical intervention to remove the cloudy lens and replace it with an artificial lens. Understanding the nature of cataracts as an opacification is fundamental in ophthalmology, as it affects how patients will experience vision changes and informs treatment approaches. The other options, which refer to conditions such as thickening of the cornea, issues with the optic nerve, or eye infections, are not related to cataracts and involve entirely different aspects of ocular health.

**9. What color defects may be distinguished by the Ishihara test?**

- A. Blue and yellow**
- B. Red and green**
- C. Red and blue**
- D. Green and yellow**

The Ishihara test is primarily designed to identify red and green color deficiencies. It consists of a series of plates, each showing a pattern of colored dots that form numbers or shapes that can be seen distinctly by individuals with normal color vision but are difficult or impossible for those with red or green color deficiencies to discern. Red-green color deficiency is one of the most common forms of color vision deficiency, affecting a significant portion of the population, particularly males. This type of deficiency can be classified into two main categories: protanopia (difficulty seeing red) and deuteranopia (difficulty seeing green). The Ishihara test specifically targets these defects by using colors that exploit the differences in how individuals with normal color perception and those with red-green deficiencies perceive colors. Identifying blue and yellow deficiencies is not the primary function of the Ishihara test, which is why options referring to those colors do not apply. While blue-yellow color deficiencies do exist, they are much rarer than red-green deficiencies and typically are not assessed in standard color vision tests like the Ishihara.

**10. Where does the Medial Canthus occur in relation to the eyelids?**

- A. At the top of the eyelids**
- B. At the temporal side of the eyes**
- C. On the nasal (inner) side of the palpebral fissure**
- D. At the bottom of the eye socket**

The medial canthus is a crucial anatomical landmark located on the nasal, or inner, side of the palpebral fissure, which is the opening between the upper and lower eyelids. It represents the point where the upper and lower eyelids meet at their inner corners. This area is significant because it houses the puncta, which are small openings that allow tears to drain from the eye into the nasal cavity. Understanding the position of the medial canthus is important in various ophthalmic procedures and assessments, especially when addressing conditions related to tear drainage or eyelid positioning. The other options relate to different locations that are not correct with respect to the anatomical definition of the medial canthus. Recognizing the medial canthus and its placement is integral to properly discussing and understanding ocular anatomy and function.

## 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](mailto: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!**

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