

# CPMA Physical Therapy (PT) 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. Which of the following is included as an example of immediate outcomes/impact?**
  - A. Manual therapy**
  - B. Therapeutic exercise**
  - C. Neuromuscular reeducation**
  - D. Wound management**
  
- 2. In PT-CPMS labeling, which term describes findings most connected to the chief complaint?**
  - A. Primary**
  - B. Secondary**
  - C. Concurrent**
  - D. Related**
  
- 3. How is outcome assessment characterized in the PT CPMS?**
  - A. Ongoing throughout care, using reliable measures**
  - B. A one-time measurement at intake**
  - C. Limited to billing documentation**
  - D. Only used after discharge**
  
- 4. Which factor is most directly tied to improving prognosis through intervention planning?**
  - A. Selection and sequencing of intervention**
  - B. Patient age**
  - C. Therapist years of experience**
  - D. Clinic location**
  
- 5. What is product 1 of the PT-CPMS?**
  - A. Diagnosis**
  - B. Treatment plan**
  - C. Prognosis**
  - D. Data collection**

- 6. When is the initial differential diagnosis list defined?**
- A. History**
  - B. During Initial And All Subsequent Physical Examinations**
  - C. After Imaging**
  - D. After Treatment**
- 7. Which stakeholder is primarily responsible for productivity and support systems in a PT clinic?**
- A. Patient**
  - B. Referral source**
  - C. Third party payer**
  - D. PT's employer**
- 8. Which statement accurately matches the label with its description?**
- A. Primary findings are most connected to the chief complaint.**
  - B. Secondary findings are unrelated to the primary diagnosis.**
  - C. Concurrent findings are the most connected to the chief complaint.**
  - D. Tertiary findings are a result of the primary diagnosis.**
- 9. In the PT-CISE, which testing domain is listed as part of the investigation of impairments?**
- A. PROM testing**
  - B. Cardiorespiratory endurance testing**
  - C. Gait analysis**
  - D. Imaging**
- 10. Which statement best describes Process 2 Evaluation?**
- A. Findings are evaluated based on physical examination**
  - B. Findings are evaluated based on imaging**
  - C. Findings are evaluated based on patient mood**
  - D. Findings are not used**

## Answers

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

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## **Explanations**

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**1. Which of the following is included as an example of immediate outcomes/impact?**

- A. Manual therapy**
- B. Therapeutic exercise**
- C. Neuromuscular reeducation**
- D. Wound management**

Immediate outcomes/impact are the effects you can observe within the same session or right after treatment. Manual therapy often produces rapid changes in tissue mobility and pain perception—joint mobilizations and soft tissue techniques can immediately increase joint play, reduce muscle guarding, and lessen pain, which lets the patient move more freely right away. Therapeutic exercise and neuromuscular reeducation typically require practice and repetition to build strength, control, and motor patterns, so their most meaningful improvements emerge over time rather than instantly. Wound management relates to healing processes that unfold over days to weeks, so its most relevant outcomes are longer-term tissue status rather than immediate functional change.

**2. In PT-CPMS labeling, which term describes findings most connected to the chief complaint?**

- A. Primary**
- B. Secondary**
- C. Concurrent**
- D. Related**

This question tests how findings are linked to the patient's main reason for visit. In PT-CPMS labeling, the term that describes a finding most directly connected to the chief complaint is primary. It signals that this finding is the central issue driving the visit and the treatment plan. Secondary would be additional but less central issues, concurrent implies things happening at the same time, and related is too broad to indicate direct central relevance. So the strongest, most connected finding is labeled as primary.

**3. How is outcome assessment characterized in the PT CPMS?**

- A. Ongoing throughout care, using reliable measures**
- B. A one-time measurement at intake**
- C. Limited to billing documentation**
- D. Only used after discharge**

Outcome assessment in PT CPMS is an ongoing process embedded in the care plan. It relies on reliable, validated measures that can be repeated over time to detect true change in a patient's function, symptoms, or disability. Because you measure at multiple points throughout treatment, you can see how a patient responds to interventions, identify when progress stalls, and adjust the plan to optimize outcomes. This continuous monitoring supports high-quality care and meaningful outcomes reporting. If you only measured at a single point, like intake, you'd miss how the patient evolves with treatment and would have no data to guide adjustments. Billing documentation isn't designed to capture clinical change over time, and using outcomes only after discharge means you've already missed opportunities to improve care during the course of treatment.

**4. Which factor is most directly tied to improving prognosis through intervention planning?**

- A. Selection and sequencing of intervention**
- B. Patient age**
- C. Therapist years of experience**
- D. Clinic location**

The most direct link to improving prognosis through intervention planning is selecting and sequencing the interventions themselves. In physical therapy, prognosis reflects the likely course and outcome given the plan you implement. By choosing appropriate interventions and arranging them in a logical progression, you create the right stimulus for motor learning, strength, endurance, and functional practice. Starting with foundational tasks the patient can perform, then gradually increasing difficulty and specificity to daily activities, helps drive improvements in function and pace recovery. This sequencing directly shapes how quickly and how well goals are reached. Other factors can influence recovery in less direct ways. Patient age can affect potential and rate of progress, but it's not something you shape through the intervention plan itself. Therapist experience and clinic location can affect access to resources or how smoothly care is delivered, but they don't determine the prognosis as directly as the content and progression of the planned interventions.

**5. What is product 1 of the PT-CPMS?**

- A. Diagnosis**
- B. Treatment plan**
- C. Prognosis**
- D. Data collection**

In physical therapy practice, turning the gathered information into a clear statement of the patient's problem is the first formal product you document. That label identifies the specific condition or dysfunction affecting the person and serves as the anchor for everything that follows. Once you have a diagnosis, you can estimate prognosis based on how the condition typically progresses and how patient factors might influence it, and you can design a treatment plan that directly targets that diagnosed problem. Data collection and examination are essential steps that feed into this diagnosis, but they're part of the process, not the final, formal product you document first. Prognosis and the treatment plan come after the diagnosis, since they depend on knowing what the patient has. So the first product documented in the PT-CPMS is the diagnosis.

**6. When is the initial differential diagnosis list defined?**

- A. History
- B. During Initial And All Subsequent Physical Examinations**
- C. After Imaging
- D. After Treatment

In clinical assessment, you form a working list of possible diagnoses from what you learn in the history and the physical exam, and you continue to refine that list as new information appears. The initial differential is created during the first evaluation, but it's not fixed—as you perform further physical examinations and gather more findings on subsequent visits, you adjust the possibilities accordingly. Imaging and treatment come after this working list is established and are used to confirm, narrow, or modify it, rather than being the starting point for defining the differential. So the best answer reflects that the differential is defined and refined during the initial evaluation and all subsequent physical examinations.

**7. Which stakeholder is primarily responsible for productivity and support systems in a PT clinic?**

- A. Patient
- B. Referral source
- C. Third party payer
- D. PT's employer**

Productivity and the systems that support daily operations are established by the clinic's owner or management—the entity responsible for running the practice. They decide how many therapists to hire, how to schedule patient visits, and what staffing, administrative support, and technology to provide. This includes front-d desk support, billing processes, documentation workflows, and equipment maintenance. These decisions shape how efficiently therapists can see patients, how much time is available for non-billable tasks, and how smoothly the clinic runs overall. The patient drives demand and outcomes, but does not set the clinic's internal systems. Referral sources influence the flow of patients into the clinic, but not the day-to-day operational framework. Payers influence reimbursement and policy considerations, which can affect workflows, but the organization that owns or runs the clinic is ultimately responsible for productivity targets and the supporting infrastructure.

**8. Which statement accurately matches the label with its description?**

- A. Primary findings are most connected to the chief complaint.**
- B. Secondary findings are unrelated to the primary diagnosis.**
- C. Concurrent findings are the most connected to the chief complaint.**
- D. Tertiary findings are a result of the primary diagnosis.**

Finding connections between the chief complaint and the different categories of findings. Primary findings are the main symptoms or signs that are directly tied to the presenting problem; they drive the initial clinical impression and diagnosis, so they are the most connected to the chief complaint. Secondary findings provide additional details that support the diagnosis, but they're not the primary link. Concurrent findings are observed at the same time as the presenting problem but aren't typically the strongest connection to the chief complaint. Tertiary findings refer to downstream effects or outcomes stemming from the primary diagnosis, rather than the direct anchor to the presenting problem.

**9. In the PT-CISE, which testing domain is listed as part of the investigation of impairments?**

- A. PROM testing**
- B. Cardiorespiratory endurance testing**
- C. Gait analysis**
- D. Imaging**

Focusing on passive motion reveals the true limitation coming from the joint or its surrounding soft tissues, separate from what the patient can voluntarily do. PROM testing measures how far a joint can move when the examiner passes it through the arc with the patient relaxed. If PROM is reduced, it points to intrinsic joint restrictions, capsular tightness, ligamentous constraints, or soft-tissue shortening as the source of the impairment. This helps clinicians decide on appropriate interventions like joint mobilizations or targeted stretching. If PROM is normal but there's a loss with active movement, the problem is more likely due to muscle weakness, inhibition, or motor control rather than a joint problem. That's why PROM testing is the go-to domain for investigating impairments in this context. The other options look at endurance, movement patterns during functional tasks, or structural imaging, which provide valuable information but do not directly isolate impairment at the joint/tissue level in the same way PROM testing does.

**10. Which statement best describes Process 2 Evaluation?**

**A. Findings are evaluated based on physical examination**

**B. Findings are evaluated based on imaging**

**C. Findings are evaluated based on patient mood**

**D. Findings are not used**

Process 2 Evaluation centers on interpreting data gathered during the examination to determine the patient's status and guide the plan of care. The physical examination provides objective findings—such as range of motion, strength, pain response, swelling, and functional test results—that are synthesized to form clinical judgments about impairments and functional limitations. This synthesis is what drives decisions about diagnosis and treatment. Imaging can support understanding, but it does not replace the information obtained from the physical examination. Mood or affect is not the primary basis for evaluating physical impairments, and saying findings aren't used would mean missing the essential step of forming conclusions from the exam data.

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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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://ptcpma.examzify.com>**

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

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