

CYO Summative Exam Practice (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 section has 4 minutes allocated?**
 - A. Hx collection**
 - B. Physical examination**
 - C. Assessment and plan**
 - D. Diagnostics/skill**

- 2. Should you arrive late to the testing area?**
 - A. No, come early**
 - B. Yes, arrive late is acceptable**
 - C. Sometimes**
 - D. Only with permission**

- 3. The remediation plan after a second EOC failure is led by Dr. Ludwig. True or False?**
 - A. Not specified**
 - B. Only if approved**
 - C. True**
 - D. False**

- 4. What is the time frame for submitting the SOAP note and case analysis?**
 - A. Immediately after the OSCE**
 - B. By the designated due date**
 - C. Within one week**
 - D. On the next exam day**

- 5. What is 25% of 160?**
 - A. 20**
 - B. 50**
 - C. 30**
 - D. 40**

- 6. During the diagnostics portion of station 4, what should you do?**
- A. Tell grader which labs/images you would order for the workup and state interpretation**
 - B. Draw blood without asking**
 - C. Perform a complete physical exam**
 - D. Write a prescription**
- 7. Is any OSCE content information allowed to be shared with classmates?**
- A. No OSCE content information may be shared with classmates.**
 - B. Sharing OSCE content with instructors is allowed.**
 - C. OSCE content may be discussed in study groups if it stays within policy.**
 - D. Sharing OSCE content with classmates is allowed.**
- 8. What is station 2?**
- A. Diagnostics and technical skills**
 - B. History collection**
 - C. Physical exam**
 - D. Documentation and feedback**
- 9. What is built into each OSCE section for points?**
- A. Professionalism and interpersonal skills**
 - B. Technical knowledge and diagnostic reasoning**
 - C. Time management**
 - D. Patient safety and ethics**
- 10. Which sentence uses active voice?**
- A. The proposal was approved by the committee.**
 - B. The committee approved the proposal.**
 - C. The committee was approving the proposal.**
 - D. The proposal approved the committee.**

Answers

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

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Explanations

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1. Which section has 4 minutes allocated?

- A. Hx collection
- B. Physical examination
- C. Assessment and plan**
- D. Diagnostics/skill

The time block is for the Assessment and plan. This part focuses on taking what you've gathered and turning it into a concise synthesis: a focused differential diagnosis, and a clear plan for management. You'll outline what tests or investigations are needed, what treatments to start or adjust, and how you'll follow up or counsel the patient. Because the emphasis here is decision-making and communication more than data collection or hands-on skill, it's typically allotted a shorter, fixed amount like four minutes. Historically, history collection and physical examination consume longer blocks because they involve gathering and verifying data, while diagnostics/skill involves performing or interpreting specific tests or procedures. The four-minute window fits the need to quickly summarize findings, justify the chosen plan, and present next steps.

2. Should you arrive late to the testing area?

- A. No, come early**
- B. Yes, arrive late is acceptable
- C. Sometimes
- D. Only with permission

Punctuality and smooth adherence to testing procedures are essential. Arriving early gives you time to complete check-in, verify your identity, and settle in without rushing. It also helps you handle any unforeseen issues—login, seating, or questions about rules—before the test begins. By being early, you reduce anxiety and prevent disruptions that can affect you and others. Late arrivals are generally not allowed to start on time and can result in missing part of the test or not being admitted at all, which undermines fairness and readiness. Plan to arrive well before the scheduled start, and if an emergency can't be avoided, contact the testing staff in advance to discuss accommodations, but the standard practice is to come early.

3. The remediation plan after a second EOC failure is led by Dr. Ludwig. True or False?

- A. Not specified
- B. Only if approved
- C. True**
- D. False

Leading the remediation plan after a second EOC failure is the person responsible for coordinating all corrective actions, making sure decisions are implemented, and keeping stakeholders informed. In this scenario, Dr. Ludwig is named to lead that remediation effort, so the statement matches the given information. This assignment of leadership provides clear accountability and a single point of contact for moving the plan forward after the repeated failure. The other options would only fit if the text were silent about leadership or placed a condition on approval, which isn't the case here since the scenario explicitly designates Dr. Ludwig.

4. What is the time frame for submitting the SOAP note and case analysis?

- A. Immediately after the OSCE**
- B. By the designated due date**
- C. Within one week**
- D. On the next exam day**

Submitting by the designated due date sets the standard for when those written components must be turned in. After an OSCE, the SOAP note and case analysis are evaluated as a separate written task, and having a fixed deadline ensures everyone has the same amount of time to craft a thorough, organized document and makes the grading process fair and predictable for the whole cohort. Immediate submission isn't guaranteed by policy and can vary by instructor; the due date is what keeps the schedule consistent and allows for timely feedback and grading. Waiting until the next exam day or within an arbitrary short window can create conflicts with other coursework and doesn't align with the official timeline.

5. What is 25% of 160?

- A. 20**
- B. 50**
- C. 30**
- D. 40**

Understanding percent and fractions: 25% means one quarter. So take a quarter of 160. You can do this by dividing by 4 or multiplying by 0.25. $160 \div 4 = 40$, or $160 \times 0.25 = 40$. Therefore, 25% of 160 is 40. The other numbers correspond to different fractions (not a quarter), so they don't match 25%.

6. During the diagnostics portion of station 4, what should you do?

- A. Tell grader which labs/images you would order for the workup and state interpretation**
- B. Draw blood without asking**
- C. Perform a complete physical exam**
- D. Write a prescription**

The diagnostics portion tests your ability to outline an appropriate workup and interpret results. You should clearly state which labs and imaging studies you would order and explain how you would interpret their results to narrow the differential and guide next steps. This shows you understand which tests are most informative for the presenting problem and how their results would change your reasoning or plan. You'd justify each test by what it would distinguish and describe how you'd interpret likely outcomes, including how different results would steer management. Procedural actions like drawing blood without consent, performing a full physical exam, or writing a prescription aren't the focus here. Instead, the emphasis is on planning the diagnostic workup and interpreting its results. For example, if the scenario involves suspected infection versus non-infectious inflammation, you'd specify relevant tests (labs, cultures, imaging) and articulate how findings would support or refute each possibility and what you'd do next based on those results.

7. Is any OSCE content information allowed to be shared with classmates?

A. No OSCE content information may be shared with classmates.

B. Sharing OSCE content with instructors is allowed.

C. OSCE content may be discussed in study groups if it stays within policy.

D. Sharing OSCE content with classmates is allowed.

OSCE content must stay confidential to maintain fairness and reliability in the exam. If students share the exact cases, prompts, or scoring criteria with classmates, it can give some learners an unfair advantage and undermine the standardization that the OSCE is built to provide. Because of that, the safest and most consistent policy is that no OSCE content information may be shared with classmates. Instructors may share general guidance or facilitate approved study activities that don't reveal actual content, but distributing specific OSCE content to peers is typically restricted. The other options either imply some permitted sharing or suggest that content can be discussed in study groups, which conflicts with the aim of keeping the exam content confidential.

8. What is station 2?

A. Diagnostics and technical skills

B. History collection

C. Physical exam

D. Documentation and feedback

Station two tests your ability to collect a patient's history. This station centers on interviewing the patient to obtain a detailed account of the presenting problem and relevant medical, social, and family information. It relies on open-ended questions, active listening, and a structured approach so you can uncover the onset, duration, severity, associated factors, and impact on daily life. A strong history provides the foundation for clinical reasoning, helping you determine what to examine next, what tests might be needed, and how to prioritize differential diagnoses. The other kinds of stations—diagnostics and technical skills, physical examination, and documentation and feedback—focus on different skills, so history collection is the best fit here.

9. What is built into each OSCE section for points?

- A. Professionalism and interpersonal skills**
- B. Technical knowledge and diagnostic reasoning**
- C. Time management**
- D. Patient safety and ethics**

In OSCEs, each station is designed to reveal how you interact with a patient as well as how you perform clinical tasks. The points assigned in every section consistently reward professionalism and interpersonal skills—how you greet the patient, listen, explain what you're doing, show empathy, respect boundaries, and communicate clearly. These qualities are observable across all scenarios, so they're built into the scoring to ensure you're assessed on how you engage with patients, not just on technical steps. While technical knowledge and diagnostic reasoning are important, they're demonstrated through the actions you take in the station, whereas the universal, cross-station requirement is to display professional behavior and strong communication. Time management or ethics may play a role in some stations, but the core, consistently scored aspect across sections is how you interact with patients and maintain professionalism.

10. Which sentence uses active voice?

- A. The proposal was approved by the committee.**
- B. The committee approved the proposal.**
- C. The committee was approving the proposal.**
- D. The proposal approved the committee.**

Active voice shows the subject doing the action to something else. In the sentence The committee approved the proposal, the committee is the one performing the verb and the proposal is the receiver, which makes the action direct and clear. The other sentence uses a form that shifts emphasis to the recipient with was approved by the committee, which is how passive voice is built. The sentence The committee was approving the proposal uses be + -ing, signaling ongoing action, which is still the subject doing the action but focuses on process rather than a completed action. The final option would read as if the proposal were doing the action to the committee, which changes who is performing the action and isn't the standard active construction. So the straightforward, completed action in simple past best illustrates active voice.

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://cyosummative.examzify.com>

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

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