DHA Speech Therapist Practice Test (Sample)

Study Guide

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Questions

1. **After treatment for dysarthria, what is a common goal for patients?**
   - **A. Improving articulation skills**
   - **B. Improving breath support**
   - **C. Increasing vocabulary**
   - **D. Enhancing comprehension**

2. **Which stage of development includes mastering the use of complex sentences?**
   - **A. Phonemic stage**
   - **B. Morphophonemic stage**
   - **C. Syntactic stage**
   - **D. Pragmatic stage**

3. **Repairing a cleft palate is an example of which type of language delay treatment?**
   - **A. Behavioral**
   - **B. Phonetic**
   - **C. Causal**
   - **D. Developmental**

4. **Where are laryngeal papillomas commonly found in the body?**
   - **A. Gastrointestinal tract**
   - **B. Vocal tract and respiratory system**
   - **C. Circulatory system**
   - **D. Nervous system**

5. **Which of the following is an example of a behavior modification intervention to increase behavior?**
   - **A. Praise**
   - **B. Criticism**
   - **C. Neglect**
   - **D. Punishment**

6. A child with anxiety and normal development is most likely to develop which condition?

A. Social anxiety disorder

B. Selective mutism

C. Generalized anxiety disorder

D. Speech sound disorder

7. What condition could be indicated by a child's lack of response to verbal instructions?

A. Hearing loss

B. Speech delay

C. Language disorder

D. Autism spectrum disorder

8. Which of the following is a problem that can occur in the pharyngeal phase of swallowing?

A. Coughing before swallowing

B. Having food or liquid leftover in the throat

C. Inability to initiate swallowing

D. Increased saliva production

9. Which level of language is associated with bits of meaning that are encoded into grammar, such as plural endings on words?

A. Phonology

B. Syntax

C. Morphology

D. Semantics

10. Bilateral hearing loss means the patient has what?

A. Hearing loss in one ear

B. Hearing loss in both ears

C. Normal hearing in one ear

D. Hearing impairment that fluctuates

Answers

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

Explanations

1. After treatment for dysarthria, what is a common goal for patients?

A. Improving articulation skills

B. Improving breath support

C. Increasing vocabulary

D. Enhancing comprehension

Improving breath support is a common goal for patients recovering from dysarthria because adequate breath support is crucial for effective speech production. Dysarthria can affect the muscles involved in speech, leading to challenges in controlling airflow and volume. By focusing on breath support, speech therapists help patients strengthen their respiratory control, which can lead to clearer, more sustained speech. This is particularly important because adequate breath support not only facilitates clearer articulation of words, but it also contributes to the natural rhythm and volume of speech. Enhancing breath support can significantly improve communication effectiveness for individuals dealing with dysarthria. In contrast, while improving articulation skills, increasing vocabulary, and enhancing comprehension are important aspects of speech and language therapy, they may not always address the immediate needs of dysarthria patients focused on physical speech production challenges. The primary goal in the context of dysarthria often centers around the physiological aspects of speech, making breath support a critical target for treatment.

2. Which stage of development includes mastering the use of complex sentences?

A. Phonemic stage

B. Morphophonemic stage

C. Syntactic stage

D. Pragmatic stage

The stage of development that includes mastering the use of complex sentences is the syntactic stage. In this stage, children typically demonstrate greater proficiency in understanding and producing complex grammatical structures. This often enables them to link ideas more coherently and express more nuanced thoughts through intricate sentence formations. The phonemic stage focuses on the awareness and manipulation of sounds within words, primarily dealing with phonological awareness. While important for literacy, it doesn't directly address sentence complexity. The morphophonemic stage involves understanding and using morphemes, which are the smallest units of meaning in a language. While it may advance a child's grammatical proficiency, it does not specifically emphasize the construction of complex sentences. The pragmatic stage centers on the social aspects of language use, such as conversation and context-appropriate language. Although this stage increases awareness of how language is used in various situations, it does not primarily concern the formation of complex sentences. Thus, focusing on syntax is crucial for developing the ability to construct complex, multi-clause sentences, making it the clear answer in this context.

3. Repairing a cleft palate is an example of which type of language delay treatment?

A. Behavioral

B. Phonetic

C. Causal

D. Developmental

Repairing a cleft palate is primarily aimed at addressing the structural issues that can lead to speech and language difficulties. This aligns with the idea of causal treatments, as it targets the underlying physical cause of the communication challenge. By surgically repairing the cleft palate, speech and language therapists are often able to facilitate improvement in articulation and overall communication skills, because the structural anomalies that impede proper speech production are corrected. Causal interventions focus on removing or mitigating the root cause of a communication disorder. In this case, the cleft palate creates challenges in the way the oral cavity functions during speech, leading to potential delays and disorders in sound production. Once the structural issues are resolved, therapy can then support further language development and speech clarity. In contrast, the other types of treatments described do not specifically address the underlying physical issues causing the speech delay in this scenario. Behavioral treatments often focus on modifying specific speech behaviors, while phonetic treatments aim to address sound production errors without necessarily correcting the physical cause. Developmental approaches generally emphasize enhancing skills in accordance with typical developmental milestones, rather than directly addressing structural impediments that might create delays.

4. Where are laryngeal papillomas commonly found in the body?

A. Gastrointestinal tract

B. Vocal tract and respiratory system

C. Circulatory system

D. Nervous system

Laryngeal papillomas are primarily located in the vocal tract and respiratory system. These benign tumors are associated with the human papillomavirus (HPV) infection and typically appear on the vocal cords, where they can lead to hoarseness, breathing difficulties, and other vocal issues. Their presence in the larynx affects voice production and can require medical intervention, such as surgical removal, especially if they obstruct the airway or significantly impact voice quality. The other options refer to systems where laryngeal papillomas do not typically occur. For instance, while the gastrointestinal tract may have its own form of papillomas, they are not linked to the larynx. Similarly, the circulatory and nervous systems do not develop laryngeal papillomas, making the vocal tract and respiratory system the correct context for these tumors.

5. Which of the following is an example of a behavior modification intervention to increase behavior?

A. Praise

B. Criticism

C. Neglect

D. Punishment

The correct answer is praise, as it is a positive reinforcement strategy commonly used in behavior modification interventions. When an individual is observed exhibiting a desired behavior, providing praise reinforces that behavior, making it more likely to occur again in the future. This approach is based on the principle that behaviors followed by positive consequences are encouraged and strengthened. In contrast, criticism, neglect, and punishment focus on negative consequences, which do not effectively support the increase of desired behaviors. Criticism can lead to feelings of discouragement and may not clarify the appropriate behaviors to be adopted. Neglect simply does not engage with the behavior, leaving the individual without guidance on what actions should be taken. Punishment may deter certain behaviors but can lead to anxiety or resistance rather than promoting the positive behaviors that praise actively reinforces. Thus, praise stands out as the most effective intervention for encouraging positive behavior changes.

6. A child with anxiety and normal development is most likely to develop which condition?

A. Social anxiety disorder

B. Selective mutism

C. Generalized anxiety disorder

D. Speech sound disorder

A child with anxiety and normal development is most likely to develop selective mutism. This condition is characterized by a consistent inability to speak in specific social situations despite the ability to speak in other settings, such as at home. Children with anxiety may experience overwhelming fear or apprehension in social contexts, leading to difficulties in initiating and maintaining verbal communication. The development of selective mutism often correlates with social anxiety, where the child feels excessive fear around peers or unfamiliar adults, hampering their spoken interactions in those environments. Selective mutism typically emerges in early childhood, coinciding with developmental milestones where social interactions increase, such as starting school. The anxiety experienced by the child can inhibit their verbal expression, causing them to resort to silence in contexts where they feel pressured or intimidated. In contrast, other options may relate to anxiety but do not directly manifest as speech-related issues in the same way. Social anxiety disorder involves broader fears of judgment and social interaction but does not specifically inhibit speech. Generalized anxiety disorder encompasses excessive worry across various domains and may not limit speech to specific contexts. A speech sound disorder refers to difficulties in articulating sounds and is not primarily driven by anxiety. Thus, selective mutism is the condition that aligns most closely with the situation described.

7. What condition could be indicated by a child’s lack of response to verbal instructions?

A. Hearing loss

B. Speech delay

C. Language disorder

D. Autism spectrum disorder

A child’s lack of response to verbal instructions can indicate hearing loss, as the ability to hear is fundamental to processing and responding to spoken language. If a child has auditory impairments, they may not perceive the sounds of speech, making it challenging for them to follow verbal instructions or communicate effectively. Hearing loss can manifest in various ways, including difficulty responding to sounds, failure to notice when someone speaks to them, or a delayed response to auditory stimuli. While speech delay, language disorders, and autism spectrum disorder might also contribute to challenges in communication or responsiveness, the direct link to a lack of response to verbal instructions suggests that auditory perception itself is compromised. Thus, evaluating a child's hearing should be one of the first steps when assessing a lack of response to verbal communication.

8. Which of the following is a problem that can occur in the pharyngeal phase of swallowing?

A. Coughing before swallowing

B. Having food or liquid leftover in the throat

C. Inability to initiate swallowing

D. Increased saliva production

The pharyngeal phase of swallowing is critical in ensuring that food is properly propelled from the throat into the esophagus. During this phase, the swallowing reflex is triggered, and several important actions take place, such as the elevation of the larynx and the closure of the airway to prevent aspiration. Having food or liquid leftover in the throat indicates that the swallowing process has not been completed effectively. This can be due to various reasons, such as reduced musculature or coordination in the pharyngeal muscles, leading to inadequate propulsion of the bolus into the esophagus. If there is a failure to move the food or liquid completely through the pharynx, it can result in residue remaining in the throat, which is indeed a specific problem associated with this phase. Coughing before swallowing generally occurs at an earlier stage, often linked to difficulties in the oral preparatory phase or anticipatory phase rather than the pharyngeal phase itself. Inability to initiate swallowing can refer to issues more broadly across the entire swallowing process, and while it might overlap with pharyngeal difficulties, it doesn't specifically indicate a phase-related problem. Increased saliva production is unrelated to the mechanical process of swallowing and is more of a physiological response that does

9. Which level of language is associated with bits of meaning that are encoded into grammar, such as plural endings on words?

A. Phonology

B. Syntax

C. Morphology

D. Semantics

The correct answer is associated with morphology, which is the study of the structure and formation of words. Morphology focuses specifically on the smallest units of meaning, known as morphemes. This includes both root words and their modifications, such as prefixes or suffixes that alter word meaning or grammatical function. For example, the addition of an "-s" to the end of a noun to indicate pluralization is a morphological change that encodes specific grammatical meaning. Understanding this concept is crucial in the context of language development and therapy. When addressing language processing issues, speech therapists often analyze how well a child uses morphological markers, as these are key indicators of their understanding of language structure. In contrast, phonology deals with sounds and their patterns in language, syntax involves the arrangement of words and phrases to create sentences, and semantics pertains to meaning in language, including the interpretation of words and sentences. Each of these levels plays a role in the overall understanding and use of language, but morphology specifically focuses on the meaningful units that connect to grammar rules, making it the correct choice in this context.

10. Bilateral hearing loss means the patient has what?

A. Hearing loss in one ear

B. Hearing loss in both ears

C. Normal hearing in one ear

D. Hearing impairment that fluctuates

Bilateral hearing loss refers to a condition where an individual experiences hearing loss in both ears. This term is used to describe the impairment's bilateral nature, indicating that both auditory pathways are affected either to the same or varying degrees. Understanding this condition is essential for speech therapists and audiologists as it impacts communication, language development, and the effectiveness of auditory processing. The challenge is typically greater for individuals with bilateral hearing loss, as they may struggle more significantly in distinguishing sounds and understanding speech in noisy environments compared to those with unilateral hearing loss, which involves only one ear. In contrast to the other options, which discuss singular hearing conditions or normal hearing, they do not capture the essence of bilateral hearing loss, which is the simultaneous impairment in both ears.