

Diploma in Radiological Technology (DRT) 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. Which tool is effective for screening children from 16 to 30 months for autism spectrum disorders?**
 - A. M-CHAT**
 - B. Ages and Stages questionnaire**
 - C. Denver II**
 - D. Cognitive adaptive test**

- 2. What is a common symptom of Abruption placentae?**
 - A. Painful vaginal bleeding**
 - B. Painless vaginal bleeding**
 - C. Palpable adnexal mass**
 - D. Abdominal rigidity**

- 3. Which cranial nerve is responsible for controlling lateral eye movement?**
 - A. CN II**
 - B. CN III**
 - C. CN IV**
 - D. CN VI**

- 4. A patient with facial pain and a fever of 102F is likely suffering from which condition?**
 - A. Allergic Rhinitis**
 - B. Viral Sinusitis**
 - C. Bacterial Sinusitis**
 - D. Common Cold**

- 5. What neurodevelopment tool is used for cognitive assessment of children younger than 36 months?**
 - A. M-CHAT**
 - B. Ages and Stages questionnaire**
 - C. Denver II**
 - D. Cognitive adaptive test**

- 6. What would a chest x-ray reveal for a patient with COPD?**
- A. Minor infiltrates**
 - B. Low, elevated diaphragm**
 - C. Moderate hyperinflation**
 - D. Blunting of costophrenic angle**
- 7. What is a typical treatment for diverticulitis when symptoms are mild?**
- A. Antibiotics only**
 - B. Surgery**
 - C. High fiber diet**
 - D. Low fiber diet**
- 8. Which of the following is most likely indicated for elderly patients with comorbidities if they have pneumonia?**
- A. A macrolide antibiotic**
 - B. Amoxicillin**
 - C. Levofloxacin**
 - D. Penicillin**
- 9. Which form of contraception is least effective for a patient who is 5'6 and weighs 205 pounds?**
- A. Ortho Evra**
 - B. Oral contraceptives**
 - C. NuvaRing**
 - D. Diaphragm**
- 10. Which tool is best for identifying risks for developmental delays in children ages birth to 6 years?**
- A. M-CHAT**
 - B. Ages and Stages questionnaire**
 - C. Denver II**
 - D. Cognitive adaptive test**

Answers

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

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Explanations

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1. Which tool is effective for screening children from 16 to 30 months for autism spectrum disorders?

- A. M-CHAT**
- B. Ages and Stages questionnaire**
- C. Denver II**
- D. Cognitive adaptive test**

The M-CHAT, or Modified Checklist for Autism in Toddlers, is specifically designed to screen children for autism spectrum disorders in the age range of 16 to 30 months. This tool consists of a series of yes/no questions that parents or caregivers can answer regarding their child's behavior and communication skills. Its effectiveness lies in its ability to identify children who may be at risk for autism, facilitating early intervention and support. This screening tool is grounded in research that emphasizes early detection of autism, which is crucial for effective treatment and support. The M-CHAT has been validated for use in this age group, making it a recognized and reliable resource. Its targeted approach allows healthcare providers to efficiently assess the likelihood of autism symptoms based on typical developmental milestones. While the other tools mentioned, such as the Ages and Stages Questionnaire, Denver II, and Cognitive Adaptive Test, serve important roles in developmental screening and assessment, they are broader in scope and not specifically tailored for autism screening in toddlers. These instruments assess various aspects of child development but do not focus exclusively on the indicators relevant to autism spectrum disorders as the M-CHAT does. Therefore, for the purpose of screening for autism specifically in the specified age range, the M-CHAT is the most effective choice.

2. What is a common symptom of Abruptio placentae?

- A. Painful vaginal bleeding**
- B. Painless vaginal bleeding**
- C. Palpable adnexal mass**
- D. Abdominal rigidity**

A common symptom of abruptio placentae is painful vaginal bleeding. This condition occurs when the placenta detaches from the uterine wall before delivery, which can lead to significant maternal and fetal complications. The pain associated with the bleeding is a key differentiator, as it occurs due to the separation of the placenta, resulting in the potential for uterine contractions and irritation of nearby structures. In cases of abruptio placentae, the bleeding is often dark red and may be accompanied by abdominal pain or cramping, making it critical for healthcare professionals to recognize these symptoms for timely intervention. The presence of pain, especially along with bleeding, underlines the urgent nature of this obstetric emergency, emphasizing the need for immediate medical evaluation and management to safeguard the health of both mother and baby.

3. Which cranial nerve is responsible for controlling lateral eye movement?

- A. CN II
- B. CN III
- C. CN IV
- D. CN VI**

The cranial nerve responsible for controlling lateral eye movement is the sixth cranial nerve, also known as the abducens nerve (CN VI). This nerve specifically innervates the lateral rectus muscle, which is one of the extraocular muscles that allows the eye to move outward, away from the midline of the body. Proper function of the abducens nerve is crucial for coordinated horizontal eye movements, allowing for clear and stable vision while tracking objects. In contrast, other cranial nerves mentioned in the options have different roles in eye movement. The optic nerve (CN II) is primarily responsible for vision, transmitting visual information from the retina to the brain. The oculomotor nerve (CN III) controls most of the eye's movements, as well as the constriction of the pupil and maintaining an open eyelid. The trochlear nerve (CN IV) innervates the superior oblique muscle, which serves a role in downward and inward eye movement. Understanding the specific functions of these cranial nerves helps clarify the essential role of the abducens nerve in facilitating lateral eye movement, making it the correct choice.

4. A patient with facial pain and a fever of 102°F is likely suffering from which condition?

- A. Allergic Rhinitis
- B. Viral Sinusitis
- C. Bacterial Sinusitis**
- D. Common Cold

A patient presenting with facial pain combined with a fever of 102°F is most indicative of bacterial sinusitis. The symptoms described suggest inflammation and infection of the sinus cavities, which is typically characterized by facial pain or discomfort in the areas around the nose, forehead, and eyes. Fever is a common response to a bacterial infection as the body tries to fight off the invading pathogens. In bacterial sinusitis, the infection is often more severe and prolonged compared to viral infections, leading to the development of symptoms that may include persistent facial pain or pressure, thick nasal discharge, and systemic symptoms such as fever. This combination of facial pain and elevated temperature aligns closely with bacterial sinusitis. In contrast, allergic rhinitis primarily produces nasal congestion, sneezing, and itchy eyes without the fever and facial pain associated with sinus infections. Viral sinusitis can cause similar symptoms to bacterial sinusitis, but it typically does not induce a high fever and usually resolves within a shorter time frame. The common cold, also caused by viruses, leads to mild respiratory symptoms but does not usually result in significant facial pain or fever of this magnitude. Thus, bacterial sinusitis is the most appropriate diagnosis based on the symptoms presented.

5. What neurodevelopment tool is used for cognitive assessment of children younger than 36 months?

- A. M-CHAT**
- B. Ages and Stages questionnaire**
- C. Denver II**
- D. Cognitive adaptive test**

The cognitive adaptive test is a valuable tool used for assessing the cognitive abilities of children younger than 36 months. This assessment focuses on how well a child can adapt to their environment, showcasing their problem-solving skills and understanding of the world around them. The cognitive adaptive test evaluates various domains including language and reasoning, providing insights into developmental milestones in early childhood. The other options, while related to assessments in early childhood development, serve different purposes or age groups. The M-CHAT is specifically designed for screening autism spectrum disorders in toddlers, rather than providing a broad cognitive assessment. The Ages and Stages questionnaire addresses developmental milestones, but it isn't solely focused on cognitive abilities; it also includes social-emotional, language, and motor skills. The Denver II is primarily used for overall developmental screening, assessing multiple domains beyond just cognition. Therefore, the cognitive adaptive test is the most appropriate choice for assessing cognitive development specifically in children younger than 36 months.

6. What would a chest x-ray reveal for a patient with COPD?

- A. Minor infiltrates**
- B. Low, elevated diaphragm**
- C. Moderate hyperinflation**
- D. Blunting of costophrenic angle**

In the context of a chest x-ray for a patient with Chronic Obstructive Pulmonary Disease (COPD), the most accurate finding would be moderate hyperinflation. COPD often leads to changes in lung structure due to chronic airflow obstruction, and on a chest x-ray, this manifests as hyperinflation. The lungs may appear larger due to air trapping, which is a result of the damaged alveoli and increased residual volume. Hyperinflation is characterized by an increased size of the individual lung lobes, a flattened diaphragm, and potentially a widened costophrenic angle. While an elevated diaphragm may seem like a plausible option, in COPD cases, the diaphragm often appears flattened or depressed due to the excessive expansion of the lungs. Therefore, the presence of moderate hyperinflation is a critical indicator of COPD on imaging, making it the correct choice.

7. What is a typical treatment for diverticulitis when symptoms are mild?

- A. Antibiotics only**
- B. Surgery**
- C. High fiber diet**
- D. Low fiber diet**

In cases of mild diverticulitis, a high fiber diet is often recommended as part of the treatment strategy. This dietary approach helps to reduce the risk of future flare-ups by improving bowel regularity and decreasing pressure within the colon. The purpose of increasing dietary fiber is to facilitate softer stools that can pass more easily through the intestines, potentially preventing the formation of diverticula and alleviating inflammation. In managing mild diverticulitis, healthcare providers typically emphasize a gradual increase in fiber intake, along with adequate hydration, to promote digestive health. While antibiotics might be prescribed in more moderate cases, they are not usually the sole treatment option when symptoms are mild. Surgery is generally considered only for severe cases or recurrent episodes that do not respond to conservative management. A low fiber diet is often recommended during acute symptoms to minimize gastrointestinal stress, but transitioning to a high fiber diet is crucial for long-term management and prevention.

8. Which of the following is most likely indicated for elderly patients with comorbidities if they have pneumonia?

- A. A macrolide antibiotic**
- B. Amoxicillin**
- C. Levofloxacin**
- D. Penicillin**

Levofloxacin is often indicated for elderly patients with pneumonia, especially those with comorbidities, due to its broad spectrum of activity and effectiveness against common pathogens associated with community-acquired pneumonia (CAP) and hospital-acquired pneumonia (HAP). This fluoroquinolone antibiotic is particularly useful because it can effectively target resistant bacteria and has excellent tissue penetration, which is critical in managing infections in older adults who may have compromised immune systems or other underlying health conditions. Additionally, levofloxacin can be administered orally or intravenously, providing flexibility in treatment plans based on the severity of the patient's condition and their ability to tolerate oral medications. Its dosing schedule is also convenient, often allowing for once-daily administration which can enhance compliance and ease of treatment. In contrast, while macrolide antibiotics (like azithromycin) and amoxicillin are suitable for pneumonia in some younger patients, their effectiveness may be limited in the face of resistant organisms, which are more prevalent among elderly patients with comorbidities. Penicillin, similarly, has a narrow spectrum of activity and may not adequately cover the pathogens of concern in this population range. Therefore, levofloxacin is chosen for its broad efficacy and suitability for more complicated clinical scenarios common in

9. Which form of contraception is least effective for a patient who is 5'6 and weighs 205 pounds?

- A. Ortho Evra**
- B. Oral contraceptives**
- C. NuvaRing**
- D. Diaphragm**

Ortho Evra is a type of hormonal contraceptive that comes in the form of a transdermal patch. Its effectiveness can be significantly impacted by a person's weight, particularly in those who are heavier. Studies have shown that individuals with a higher body mass index (BMI) may not absorb the hormones effectively from the patch, which can lead to a decreased contraceptive efficacy. For women who weigh over a certain threshold, typically around 198 pounds, the patch may not provide sufficient hormonal dosage to prevent ovulation effectively, making it less reliable as a contraceptive method compared to other forms. In contrast, oral contraceptives and methods like the NuvaRing deliver hormones directly into the bloodstream and are less likely to be affected by a patient's weight to the same degree as the patch. The diaphragm, a barrier method, does not involve hormones at all and its efficacy is related to correct and consistent use, making it less dependent on body weight. Therefore, given the impact of body weight on the efficacy of the Ortho Evra patch, it is identified as the least effective option for this specific patient profile.

10. Which tool is best for identifying risks for developmental delays in children ages birth to 6 years?

- A. M-CHAT**
- B. Ages and Stages questionnaire**
- C. Denver II**
- D. Cognitive adaptive test**

The Denver II is a widely recognized screening tool specifically designed to assess the developmental milestones of children from birth to 6 years of age. It evaluates a variety of areas, including personal-social skills, fine motor skills, language, and gross motor skills. By observing a child's performance on a series of tasks within these domains, the Denver II can effectively identify children who may have developmental delays or who are at risk for such delays. Its age-appropriate norms and standardized administration make it a reliable choice for early identification of developmental concerns. This early identification is crucial for timely interventions, which can significantly improve outcomes for children facing developmental challenges. The Denver II's comprehensive approach to assessing multiple aspects of a child's development is what sets it apart as an optimal tool for this purpose. While other tools like the M-CHAT (which primarily focuses on autism screening), the Ages and Stages Questionnaire (which covers a broad range of developmental domains but is more parent-report based), and the Cognitive Adaptive Test (which evaluates cognitive abilities) are valuable in certain contexts, they do not have the same breadth and specificity for identifying developmental delays across various domains in the very young child population.

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://radtechdrt.examzify.com>

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

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