

MOTOR SPEECH EXAM 2 PRACTICE (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://motorspeech2.examzify.com>



Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	16

SAMPLE

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

SAMPLE

- 1. What is a defining feature of prosodic excess in spastic dysarthria?**
 - A. Reduced speech rate and increased pitch variability
 - B. Equal stress and slow rate of speech
 - C. Short phrases with high volume
 - D. Monopitch with rapid speech
- 2. What condition is often the most common cause of apraxia?**
 - A. Traumatic brain injury
 - B. Stroke
 - C. Progressive neurodegeneration
 - D. Infection
- 3. What is a defining characteristic of strength in UUMN dysarthria?**
 - A. Increased vocal loudness
 - B. Weakness
 - C. Increased phonation time
 - D. Consistent articulation
- 4. What is a common symptom of Parkinson's disease related to movement?**
 - A. Excessive energy
 - B. Rapid limb movements
 - C. Slowed movements
 - D. Unrestricted joint motion
- 5. Which of these methods is mainly used for initiating structured speech practice?**
 - A. Visual prompts
 - B. Group therapy sessions
 - C. Initiating speech activities
 - D. Language comprehension drills
- 6. What are common motor control problems in ataxic dysarthria?**
 - A. Rapid speech and high pitch
 - B. Incoordination, decreased muscle tone, and slowness
 - C. Consistent speech rhythm and clarity
 - D. Difficulty with auditory processing

7. What type of movements do patients with apraxia struggle with the most?

- A. Spontaneous movements
- B. Volitional movements
- C. Gestural movements
- D. Involuntary movements

8. Which symptom indicates incoordination in ataxic dysarthria?

- A. Stuttering
- B. Rhythmic tremor
- C. Sustained phonation
- D. Normal speech patterns

9. Among the following, which is NOT considered a treatment option for apraxia?

- A. Melodic Intonation Therapy (MIT)
- B. Alternating vocal exercises
- C. Drill
- D. Prompts for Restructuring Oral Motor Phonetic Targets (PROMPT)

10. What are intelligibility drills designed to improve?

- A. Speech rhythm
- B. Speech clarity
- C. Voice pitch
- D. Language comprehension

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What is a defining feature of prosodic excess in spastic dysarthria?

- A. Reduced speech rate and increased pitch variability
- B. Equal stress and slow rate of speech**
- C. Short phrases with high volume
- D. Monopitch with rapid speech

A defining feature of prosodic excess in spastic dysarthria is characterized by equal stress and a slow rate of speech. Prosodic excess refers to the unnatural rhythm and intonation patterns that can occur in this type of dysarthria, where speech sounds monotonous and effortful. In spastic dysarthria, the speech mechanism is often impaired due to the inability to properly control the muscles involved in speech production, leading to the characteristic equal stress across syllables and a slower delivery of speech. This is important to identify because it contrasts with other speech characteristics that may be present in different types of dysarthria, where speech might be more rapid or vary in pitch and stress. By understanding these patterns, clinicians can better diagnose and treat individuals with spastic dysarthria, focusing on strategies that address the prosodic features of their speech.

2. What condition is often the most common cause of apraxia?

- A. Traumatic brain injury
- B. Stroke**
- C. Progressive neurodegeneration
- D. Infection

Stroke is often the most common cause of apraxia due to its impact on the brain's neurological pathways that control motor planning and execution, particularly in the areas responsible for speech. When a stroke occurs, it can lead to damage in the left hemisphere of the brain, particularly in regions such as Broca's area, which is crucial for speech production. This damage disrupts the neural signals necessary for planning the precise movements involved in speech, resulting in apraxia, which is characterized by difficulties in coordinating the muscle movements needed to say words, even though the person knows what they want to say. While traumatic brain injury, progressive neurodegeneration, and infections can also lead to apraxia, they tend to be less common causes compared to stroke. Traumatic brain injury may affect specific regions of the brain but is not as widespread in causing apraxia as stroke incidents tend to be. Progressive neurodegenerative diseases, like ALS or dementia, can lead to apraxia as part of a broader decline in cognitive and motor function, but these conditions are usually less prevalent than strokes when considering the immediate onset of apraxia. Infections, while they may affect brain function, typically would not result in apraxia as a primary consequence in

3. What is a defining characteristic of strength in UUMN dysarthria?

- A. Increased vocal loudness
- B. Weakness**
- C. Increased phonation time
- D. Consistent articulation

In UUMN (Unilateral Upper Motor Neuron) dysarthria, a defining characteristic is weakness, specifically in the muscles that control speech production. This weakness typically affects one side of the body, which can lead to noticeable speech deficits. In UUMN dysarthria, the weakness may manifest as reduced precision of articulation, causing the speech to sound slurred or distorted. The impact on strength is often accompanied by other features such as imprecise consonants and the potential for reduced vocal loudness due to the imbalance between muscle strength on either side of the vocal apparatus. Understanding this characteristic helps in distinguishing UUMN dysarthria from other types of speech disorders. For instance, increased vocal loudness, increased phonation time, and consistent articulation are features that may not align with the presentation of UUMN dysarthria, as they do not adequately represent the key manifestations of muscle weakness that define this condition.

4. What is a common symptom of Parkinson's disease related to movement?

- A. Excessive energy
- B. Rapid limb movements
- C. Slowed movements**
- D. Unrestricted joint motion

Slowed movements, known as bradykinesia, is a hallmark symptom of Parkinson's disease. This neurological disorder affects the basal ganglia, a group of structures in the brain responsible for coordinating movement. As Parkinson's progresses, individuals often experience a significant reduction in the speed and fluidity of their movements. This can manifest in daily activities, making tasks like walking, dressing, or even speaking more challenging and time-consuming. Other options do not accurately reflect the common motor symptoms associated with Parkinson's disease. For example, excessive energy and unrestricted joint motion are not characteristic of this condition; in fact, individuals often face fatigue and stiffness. Rapid limb movements are generally not seen in Parkinson's; instead, individuals may demonstrate minimal, shuffling steps due to the slowed pace of their movements. Understanding these symptoms is crucial for recognizing and managing the effects of Parkinson's disease.

5. Which of these methods is mainly used for initiating structured speech practice?

- A. Visual prompts
- B. Group therapy sessions
- C. Initiating speech activities**
- D. Language comprehension drills

The method primarily used for initiating structured speech practice is focused on initiating speech activities. This approach is essential as it directly encourages the patient to engage in speaking tasks that are organized and purposeful, fostering their ability to practice speech in a systematic manner. Structured speech practice often involves setting clear goals and providing a framework in which the patient can practice various speech skills. By initiating specific speech activities, clinicians are able to facilitate targeted practice. This method helps to establish routine practice sessions, making it easier for patients to work on particular speech sounds, fluency, or other aspects of their speech in a controlled and supportive environment. While visual prompts can assist in enhancing comprehension and recall during practice, and group therapy can offer social motivation and shared experiences, they are not as directly focused on initiating speech as structured activities are. Language comprehension drills help with understanding and processing language but do not specifically target the act of speech production. Therefore, the best choice for initiating structured speech practice aligns closely with engaging patients in organized speaking tasks.

6. What are common motor control problems in ataxic dysarthria?

- A. Rapid speech and high pitch
- B. Incoordination, decreased muscle tone, and slowness**
- C. Consistent speech rhythm and clarity
- D. Difficulty with auditory processing

Ataxic dysarthria is characterized by specific motor control issues that affect the coordination and execution of speech movements. In this case, incoordination, decreased muscle tone, and slowness are commonly observed problems. Individuals with ataxic dysarthria often display incoordination due to the disruption of signals sent from the cerebellum, which is crucial for smooth and precise movements. This can lead to difficulties in coordinating the various speech muscles required for phonation, articulation, and prosody, resulting in an irregular speech rhythm and impaired intelligibility. Decreased muscle tone is another feature of ataxic dysarthria. This hypotonia can contribute to a lack of control over speech movements, making it difficult for individuals to articulate words clearly. Finally, slowness in speech production is often noted, as the coordination difficulties can lead to hesitation and an overall slower speech rate. This impacts the fluidity and rhythm of speech, which are essential for effective communication. Overall, recognizing these common motor control problems in ataxic dysarthria helps in understanding the nature of the speech deficits and designing appropriate therapeutic interventions.

7. What type of movements do patients with apraxia struggle with the most?

- A. Spontaneous movements
- B. Volitional movements**
- C. Gestural movements
- D. Involuntary movements

Patients with apraxia typically struggle most with volitional movements, which are purposeful and intentional actions initiated by the individual. This difficulty arises because apraxia is a motor speech disorder that affects the brain's ability to plan and coordinate the complex sequence of movements required for speech and other motor tasks. The challenge lies in the execution of these movements, particularly when the patient is consciously trying to perform them. Spontaneous movements, on the other hand, occur without deliberate intent and are generally less affected in individuals with apraxia. Similarly, gestural movements may be impaired as well, but the primary issue in apraxia is the volitional aspect that requires conscious planning and execution. Involuntary movements are not typically associated with apraxia, as they occur without the need for conscious thought or planning. Focusing on the volitional aspect helps in understanding the core challenges faced by individuals with apraxia in their everyday communication and motor activity.

8. Which symptom indicates incoordination in ataxic dysarthria?

- A. Stuttering
- B. Rhythmic tremor**
- C. Sustained phonation
- D. Normal speech patterns

In ataxic dysarthria, the primary symptom indicating incoordination is a rhythmic tremor. This type of tremor arises from a disruption in the cerebellar control of motor function, which is essential for smooth and coordinated movements necessary for speech. Rhythmic tremor can manifest during speech production, leading to irregularities in pitch and loudness, giving the voice a shaky or quavering quality that reflects the underlying motor coordination issues typical of ataxic dysarthria. Other symptoms, like stuttering, while they may relate to different speech disorders, do not specifically indicate incoordination characteristic of ataxic dysarthria. Sustained phonation typically tests the strength and stability of the voice but does not directly showcase the type of motor control issues seen in ataxic dysarthria. Normal speech patterns signify effective coordination and control, which would not be a symptom of ataxic dysarthria. Therefore, rhythmic tremor is the correct indication of incoordination in this specific dysarthria.

9. Among the following, which is NOT considered a treatment option for apraxia?

- A. Melodic Intonation Therapy (MIT)
- B. Alternating vocal exercises**
- C. Drill
- D. Prompts for Restructuring Oral Motor Phonetic Targets (PROMPT)

The correct answer indicates that alternating vocal exercises are not considered a treatment option for apraxia. In the context of speech therapy, particularly for apraxia, effective treatment strategies focus on the coordination and sequencing of movements necessary for speech production. Melodic Intonation Therapy utilizes melodies and rhythms to aid in speech production, specifically helping individuals with apraxia by tapping into the musical aspects of speech. PROMPT involves tactile-kinesthetic cues, helping patients navigate the physical aspects of speech production. Drill therapy is a well-established method that emphasizes repetitive practice, which is crucial for individuals with apraxia as it reinforces the neural pathways involved in speech. Alternating vocal exercises, on the other hand, tend to focus more on phonation and might not directly address the specific deficits in planning and executing speech movements that are characteristic of apraxia. Therefore, this option does not align with the targeted treatment strategies used for this disorder.

10. What are intelligibility drills designed to improve?

- A. Speech rhythm
- B. Speech clarity**
- C. Voice pitch
- D. Language comprehension

Intelligibility drills are specifically designed to improve speech clarity. The focus of these drills is on enhancing the listener's ability to understand the speaker's speech. In speech therapy or practice, activities that emphasize articulation, pronunciation, and the modulation of speech can significantly contribute to making spoken language clearer. By engaging in intelligibility drills, individuals work on their phonetic clarity, ensuring that each sound is pronounced correctly and is easily distinguishable. This is particularly important for individuals with speech disorders, where clarity can be compromised. Improving speech clarity through targeted practice not only benefits the speaker in social interactions but also enhances communication in various contexts, leading to increased confidence and effectiveness in conveying messages. The other options, while related to various aspects of communication, do not directly pertain to the primary aim of intelligibility drills. Speech rhythm pertains to the timing and flow of speech, voice pitch relates to the frequency of the voice, and language comprehension addresses understanding spoken language rather than the clarity of how it is produced.

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://motorspeech2.examzify.com>

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

SAMPLE