NBEO Human Development 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

1. What is the threshold for FCPL testing such as Teller Acuity Cards?

A. 0 Percent

B. 25 Percent

C. 50 Percent

D. 75 Percent

2. By about 12 months of age, FPCL methods typically yield acuity around which Snellen value?

A. 20/20

B. 20/50

C. 20/70

D. 20/100

3. Approximately what percent of patients over the age of 85 have hearing loss?

A. 25%

B. 50%

C. 75%

D. 90%

4. Which develops first in infants: divergence or convergence?

A. Divergence

B. Convergence

C. Both at the same time

D. Neither develops

5. In aging, decreased dark adaptation is due to cataracts and which rhodopsin-related change?

A. Decreased formation of rhodopsin

B. Decreased formation of iodopsin

C. Both rhodopsin and iodopsin

D. Increased rhodopsin formation

6. Which test is used to measure visual perception with potential motor involvement and is widely used in development?

A. TVPS

B. MFVP

C. DTVP

D. MMSE

7. In elderly patients, refractive error shifts toward which astigmatism pattern?

A. Against-the-Rule

B. With-the-Rule

C. Oblique

D. No shift

8. Which gaze direction would be most challenging in aging?

A. Upgaze

B. Downgaze

C. Horizontal right

D. Horizontal left

9. Which two factors are the main contributors to decreased dark adaptation in elderly?

A. Cataracts and decreased formation of rhodopsin

B. Cataracts and decreased formation of iodopsin

C. Glaucoma and cataracts

D. Decreased rhodopsin and iodopsin formation

10. By about 3.5 years old, which two shapes are among those commonly drawn?

A. Circle and Cross

B. Circle and Triangle

C. Circle and Square

D. Triangle and Cross

Answers

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

Explanations

1. What is the threshold for FCPL testing such as Teller Acuity Cards?

A. 0 Percent

B. 25 Percent

C. 50 Percent

D. 75 Percent

In FCPL testing with Teller Acuity Cards, the threshold is the finest pattern someone can reliably discriminate when given two choices. Since it's a two-alternative forced-choice setup, you aren't measuring random guessing; you're measuring true discrimination. The standard criterion used is a level of performance well above guessing—roughly three-quarters of the trials correct. That level indicates the child isn't just guessing but genuinely detecting the pattern. Practically, you test cards across different spatial frequencies, compute how often the child responds correctly at each frequency, and identify the highest frequency that meets that criterion. That frequency is reported as the acuity threshold for the test.

2. By about 12 months of age, FPCL methods typically yield acuity around which Snellen value?

A. 20/20

B. 20/50

C. 20/70

D. 20/100

Infants' visual acuity grows rapidly in the first year, and FPCL is used to estimate acuity in preverbal children by showing a pattern and watching whether they reliably look toward it. By about 12 months, the level of detail they can resolve on this method typically corresponds to about 20/50 Snellen. This reflects normal maturation of the visual system for that age with this testing approach. A 20/20 result would be unusually sharp for this age on FPCL, while 20/70 or 20/100 would suggest more delayed development or a potential issue.

3. Approximately what percent of patients over the age of 85 have hearing loss?

A. 25%

B. 50%

C. 75%

D. 90%

As people age, the likelihood of hearing loss increases due to presbycusis, a gradual degenerative change in the inner ear and auditory pathways. By about 85 years old, roughly half of individuals have some degree of hearing impairment, making this age group the point where prevalence crosses the 50% mark. This reflects that hearing loss becomes a common issue in the oldest adults, often bilateral and sensorineural, affecting communication, safety, and quality of life. While some individuals in this age range may have little or no loss and others more severe loss, the approximate 50% figure is the best general estimate for this group.

4. Which develops first in infants: divergence or convergence?

A. Divergence

B. Convergence

C. Both at the same time

D. Neither develops

Divergence appears before convergence in infancy because the early binocular system can more readily support outward eye movements to maintain alignment on distant targets, while the ability to converge for near viewing depends on the maturation of accommodation and the associated vergence control. As infants grow, accommodation and the near fusion mechanisms develop, allowing convergence to emerge later. This sequence means divergence is the first vergence ability to develop.

5. In aging, decreased dark adaptation is due to cataracts and which rhodopsin-related change?

A. Decreased formation of rhodopsin

B. Decreased formation of iodopsin

C. Both rhodopsin and iodopsin

D. Increased rhodopsin formation

Dark adaptation relies on rod vision and the regeneration of rhodopsin after it's bleached by light. With aging, the process that forms rhodopsin can be reduced, so there are fewer rhodopsin molecules ready to respond in low-light conditions. This makes night vision slower and less sensitive, even when cataracts are present. Iodopsin is the cone pigment important for color and daylight vision, not the primary driver of dark adaptation, so changes in its formation don't explain the decrease. Increased rhodopsin formation would actually enhance night vision, which isn't observed here.

6. Which test is used to measure visual perception with potential motor involvement and is widely used in development?

A. TVPS

B. MFVP

C. DTVP

D. MMSE

Visual perception tests can be designed to require different levels of motor response. The Developmental Test of Visual Perception includes tasks that need the child to produce a motor response—like copying, drawing, or arranging figures—while evaluating how well they perceive and interpret visual information. This combination reflects how perception and motor skills work together in real-life development, such as handwriting, copying shapes, or recognizing forms and their relationships, which are all critical during childhood. Because it integrates both seeing and acting, it's widely used to identify perceptual deficits that impact learning and daily tasks in development. In contrast, motor-free tests measure visual perception without requiring a motor response, which misses how perception translates into movement. The MMSE is a general cognitive screen for adults and isn't focused on developmental visual perception, and motor-free tests like the TVPS or MFVP don't capture the motor involvement part. So the test that best fits testing visual perception with potential motor involvement and is widely used in development is the Developmental Test of Visual Perception.

7. In elderly patients, refractive error shifts toward which astigmatism pattern?

A. Against-the-Rule

B. With-the-Rule

C. Oblique

D. No shift

As people age, the way the cornea curves tends to change so that the horizontal meridian becomes relatively steeper than the vertical one. This flattening of the vertical meridian with age, along with other age-related changes in the cornea and eyelids, shifts the astigmatism pattern from the younger, typically vertical-steeper (with-the-rule) toward the horizontal-steeper pattern, which is called against-the-rule. In practical terms, elderly patients often end up with astigmatism where the steepest meridian is horizontal, so the refractive error shifts toward against-the-rule.

8. Which gaze direction would be most challenging in aging?

A. Upgaze

B. Downgaze

C. Horizontal right

D. Horizontal left

Vertical gaze control relies on midbrain circuitry, especially the pathways in the rostral interstitial nucleus of the MLF and the interstitial nucleus of Cajal that generate and coordinate upward eye movements. As people age, these vertical gaze centers are more vulnerable to decline, leading to slower initiation and reduced range of upward eye movements. The horizontal gaze system, fed by pontine structures like the PPRF and the abducens nucleus, tends to be relatively better preserved with aging. Because the upward direction depends on these midbrain vertical gaze pathways and they are the ones most affected, looking upward becomes the most challenging gaze direction for older adults.

9. Which two factors are the main contributors to decreased dark adaptation in elderly?

A. Cataracts and decreased formation of rhodopsin

B. Cataracts and decreased formation of iodopsin

C. Glaucoma and cataracts

D. Decreased rhodopsin and iodopsin formation

Dark adaptation relies on the rods in the retina and the rapid regeneration of rhodopsin after it's bleached by light. In older individuals, two main factors slow this process: cataracts, which cloud the lens, reduce the amount and quality of light reaching the retina, and thus blunt the rod signal needed for twilight and night vision; and decreased formation or slower regeneration of rhodopsin in the rods, which delays the restoration of rod sensitivity after exposure to bright light. Cone pigment (iodopsin) is involved in daylight and color vision, not the night-time adaptation that primarily uses rods, so its reduced formation isn't the driving factor here. Glaucoma affects nerve transmission rather than the photochemical steps of dark adaptation, so it's not the primary contributor. Therefore, cataracts plus slower rhodopsin production best explain the age-related decrease in dark adaptation.

10. By about 3.5 years old, which two shapes are among those commonly drawn?

A. Circle and Cross

B. Circle and Triangle

C. Circle and Square

D. Triangle and Cross

By about 3.5 years, children typically show a circle along with a cross when drawing, reflecting two complementary skills: producing a closed curved shape and coordinating vertical plus horizontal strokes. The circle is one of the first recognizable shapes a preschooler can form, signaling control of curved movements. The cross, made from two perpendicular lines, demonstrates emerging planning and fine-motor coordination as kids begin combining simple strokes into more complex symbols. Shapes like triangles and squares generally require more precise angles and steadier control, so they tend to appear a bit later. Therefore, circle and cross is the most common pairing at this age, though individual variation is normal.

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://nbeohumandev.examzify.com

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