Praxis Speech-Language Pathology (5331) Form 1 Practice Test (Sample)

Study Guide

Everything you need from our exam experts!

Table of Contents

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. **Which muscle is primarily responsible for the abduction of vocal folds?**

   A. Lateral cricoarytenoid

   B. Interarytenoid

   C. Cricothyroid

   D. Posterior cricoarytenoid

2. **How does language development typically evolve in children?**

   A. From complex sentences to single words

   B. From cooing to babbling to single words and beyond

   C. From gestures to written communication

   D. From simple sounds to complex paragraphs

3. **Which pragmatics treatment goal best addresses a young child's language usage?**

   A. Child will request a turn with gestures or words 90% of the time

   B. Child will use a two-word combination 90% of the time

   C. Child will correctly produce velars 90% of the time

   D. Child will use irregular past tense forms of specific verbs 90% of the time

4. **What technique is likely to help a client with aphonia?**

   A. Throat clearing exercises

   B. Respiratory exercises

   C. Pairing speech sounds

   D. Increasing pitch range

5. **What was a primary reason for investigating the effects of loudness on speech improvement?**

   A. To find correlations with other linguistic factors

   B. To assess its impact on auditory processing skills

   C. To evaluate the common experiences of individuals with dysarthria

   D. To analyze the use of speech therapy interventions

6. What is the most common voice quality associated with dysarthria in clients with amyotrophic lateral sclerosis?

A. Harsh, strained voice quality

B. Breathy voice quality

C. Clear voice quality

D. Raspy voice quality

7. What approach is commonly used for helping children with language delay?

A. Behavioral therapy

B. Play-based therapy

C. Medication therapy

D. Group therapy

8. Individuals with hemifacial microsomia most likely exhibit which condition?

A. Laryngeal dysfunction

B. Ear malformation

C. Webbed fingers and toes

D. Widely spaced eyes

9. For a child who produces [t] for /s/ and [b] for /v/, which aspect of language should intervention target?

A. Morphology

B. Syntax

C. Phonology

D. Semantics

10. What conclusion can be drawn about poor auditory memory in children with language impairments?

A. It is unchangeable and linked directly to language impairments

B. It can be improved through specific language-intervention programs

C. It requires further research to clarify its relationship with language issues

D. It indicates that children have poor representational skills

Answers

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

Explanations

1. Which muscle is primarily responsible for the abduction of vocal folds?

A. Lateral cricoarytenoid

B. Interarytenoid

C. Cricothyroid

D. Posterior cricoarytenoid

The muscle primarily responsible for the abduction of the vocal folds is the posterior cricoarytenoid. This muscle plays a crucial role in the process of vocal fold abduction by acting on the arytenoid cartilages. When the posterior cricoarytenoid contracts, it pulls the muscular processes of the arytenoid cartilages outward, leading to the separation of the vocal folds, which is essential for normal breathing and the production of voice. Understanding the function of the other muscles listed is important as they have different roles. The lateral cricoarytenoid, for instance, is involved in the adduction of the vocal folds, bringing them together during phonation. The interarytenoid muscle also aids in adduction by further stabilizing and bringing the arytenoids together. The cricothyroid muscle mainly contributes to the tension and elongation of the vocal folds, affecting pitch but not directly involved in their abduction. Therefore, the posterior cricoarytenoid is correctly identified as the main muscle responsible for abducting the vocal folds due to its unique anatomical positioning and function in facilitating glottal opening.

2. How does language development typically evolve in children?

A. From complex sentences to single words

B. From cooing to babbling to single words and beyond

C. From gestures to written communication

D. From simple sounds to complex paragraphs

Language development in children typically follows a progression that begins with cooing, transitions to babbling, and then advances to the use of single words and beyond. At the very beginning of language acquisition, infants engage in cooing, which consists of vowel-like sounds generated mainly when they are content. This phase is followed by babbling, wherein children begin to produce repetitive consonant-vowel combinations like "ba-ba" or "da-da." This stage is crucial for practicing the sounds of their language and gaining control over their vocalizations. As the child continues to grow, they start to form single words that correspond to familiar objects, actions, or people in their environment. This is a significant milestone, as it demonstrates their ability to connect sounds with meaning. Gradually, children combine these single words into two-word phrases and eventually progress to more complex sentences as their cognitive and social development continues. This developmental pathway emphasizes the natural evolution of language skills, reflecting a universal pattern observed in children regardless of cultural or linguistic background.

3. Which pragmatics treatment goal best addresses a young child's language usage?

A. Child will request a turn with gestures or words 90% of the time

B. Child will use a two-word combination 90% of the time

C. Child will correctly produce velars 90% of the time

D. Child will use irregular past tense forms of specific verbs 90% of the time

The goal of having a child request a turn with gestures or words 90% of the time directly addresses the pragmatic aspects of language use, which involve the social rules and contexts of communication. Pragmatics encompasses how language is used in social situations, including turn-taking, initiating conversations, and responding appropriately to others. By focusing on requesting a turn, this goal emphasizes the child's ability to engage in interactive communication, which is crucial for developing social skills and effective conversational abilities. It encourages the child to utilize both verbal and non-verbal communication methods, recognizing that gestures are an important aspect of how young children often express themselves. In contrast, the other options are more focused on specific grammatical forms or phonetic productions, which pertain to syntax or articulation rather than the social use of language. For effective communication, especially in a social context, understanding how to appropriately request and manage turn-taking is essential. Therefore, this goal not only supports the development of pragmatic skills but also facilitates the child's overall language interaction within their environment.

4. What technique is likely to help a client with aphonia?

A. Throat clearing exercises

B. Respiratory exercises

C. Pairing speech sounds

D. Increasing pitch range

The technique of throat clearing exercises can be beneficial for a client with aphonia, which is the loss of voice or the inability to speak. This approach helps to promote vocal cord movement and can stimulate the vocal folds, encouraging them to vibrate and produce sound. Throat clearing can serve as a warm-up exercise for the vocal cords, which may improve the ability to produce voice in individuals who are struggling with aphonia. Moreover, throat clearing exercises provide a safe and controlled way for clients to experiment with sound production without the pressure of full speech. This practice can help build confidence and may lead to gradual improvements in voicing capabilities. In many speech therapy settings, reestablishing a sense of vocal control and comfort is essential for clients dealing with these types of voice disorders. Other techniques, while potentially useful in broader therapeutic contexts, may not specifically target the immediate needs of someone with aphonia as effectively as throat clearing exercises.

5. What was a primary reason for investigating the effects of loudness on speech improvement?

A. To find correlations with other linguistic factors

B. To assess its impact on auditory processing skills

C. To evaluate the common experiences of individuals with dysarthria

D. To analyze the use of speech therapy interventions

Investigating the effects of loudness on speech improvement primarily focuses on evaluating the common experiences of individuals with dysarthria. Individuals with dysarthria often struggle with articulation, speech clarity, and overall speech intelligibility, which can be significantly influenced by the loudness or volume of their speech. Understanding how loudness affects their speech can lead to tailored therapeutic strategies that enhance their communication abilities and confidence. By exploring this aspect, clinicians can identify patterns and consistent challenges faced by those with dysarthria, allowing them to develop more effective speech therapy interventions. The goal of such investigations is to improve communication for individuals who may face social and emotional challenges due to their speech difficulties. This exploration can help in creating a more structured approach to therapy, focusing on the gains in speech intelligibility as influenced by loudness levels.

6. What is the most common voice quality associated with dysarthria in clients with amyotrophic lateral sclerosis?

A. Harsh, strained voice quality

B. Breathy voice quality

C. Clear voice quality

D. Raspy voice quality

The most common voice quality associated with dysarthria in clients with amyotrophic lateral sclerosis (ALS) is characterized as having a harsh, strained quality. This is primarily due to the progressive neurological degeneration that impacts the muscles involved in speaking. In ALS, the motor neurons that control voluntary muscle movements, including those necessary for phonation, become damaged. This leads to a breakdown in the coordination and strength of the vocal cords, often resulting in a strain or tension in the voice. Individuals with this type of dysarthria may struggle to maintain a steady airflow, leading to a voice that sounds tight and strained. The harshness of the voice is notable as it contrasts with other types of voice qualities that may be present in different speech disorders. Understanding this specific voice quality is crucial for speech-language pathologists when assessing and developing therapeutic strategies for clients with ALS.

7. What approach is commonly used for helping children with language delay?

A. Behavioral therapy

B. Play-based therapy

C. Medication therapy

D. Group therapy

The play-based therapy approach is highly effective for assisting children with language delays because it naturally integrates language development within a context that is engaging and enjoyable for them. Children often learn best when they are actively involved in playful activities, which allow them to explore communication in a stress-free environment. This type of therapy encourages interaction, verbalization, and the use of language through games, storytelling, and social play with peers or therapists. In play-based therapy, the focus is placed on the child's interests, which fosters motivation and encourages spontaneous language use. Furthermore, this approach facilitates meaningful communication and offers opportunities for the child to practice new words, phrases, and social interactions within a safe and supportive framework. By incorporating play, therapists can also tailor sessions to the child's specific developmental level and needs, making it a versatile option for addressing language delays.

8. Individuals with hemifacial microsomia most likely exhibit which condition?

A. Laryngeal dysfunction

B. Ear malformation

C. Webbed fingers and toes

D. Widely spaced eyes

Individuals with hemifacial microsomia primarily experience ear malformations as a hallmark of the condition. Hemifacial microsomia is characterized by underdevelopment of one side of the face, which often includes anomalies of the ear (auricle) and the structures associated with it. This condition can lead to external ear shapes that are atypical, reduced ear size, or complete absence of the ear on the affected side. The close association between hemifacial microsomia and ear malformations is well documented, making ear malformations the most likely condition to be exhibited by these individuals. The other conditions mentioned do not have a direct correlation with hemifacial microsomia. For example, laryngeal dysfunction is not a typical finding associated with this facial deformity. Webbed fingers and toes (syndactyly) and widely spaced eyes can occur in various congenital syndromes, but they are not specifically linked to hemifacial microsomia. This distinction is crucial for understanding the multifaceted aspects of congenital anomalies and their specific manifestations.

9. For a child who produces [t] for /s/ and [b] for /v/, which aspect of language should intervention target?

A. Morphology

B. Syntax

C. Phonology

D. Semantics

The correct answer focuses on phonology, which is the aspect of language that deals with the sound system and how sounds function within a particular language. In this scenario, the child is demonstrating phonological errors by substituting [t] for the sound /s/ and [b] for the sound /v/. These substitutions indicate that the child is struggling with the articulation and perception of specific phonemes, which are critical for producing and understanding spoken language. Intervention should target these phonological errors to help the child articulate sounds correctly and ultimately improve their overall speech intelligibility. By addressing the phonological aspects of their speech, the child can develop the skills necessary to produce the correct sounds and enhance their communication abilities. The other aspects—morphology, syntax, and semantics—focus on the rules of word formation, sentence structure, and meaning, respectively. While these areas are also important for language development, they are not the primary concern in cases where specific sound substitutions are evident.

10. What conclusion can be drawn about poor auditory memory in children with language impairments?

A. It is unchangeable and linked directly to language impairments

B. It can be improved through specific language-intervention programs

C. It requires further research to clarify its relationship with language issues

D. It indicates that children have poor representational skills

The conclusion that can be drawn about poor auditory memory in children with language impairments is best represented by the idea that it requires further research to clarify its relationship with language issues. Auditory memory is a complex construct that interacts with various cognitive and linguistic skills. Research has shown that while auditory memory problems can co-occur with language impairments, the precise nature of their relationship is still not fully understood. It remains unclear whether deficits in auditory memory directly contribute to language impairments or if they are a byproduct of other cognitive deficits. Therefore, further investigation is necessary to understand how these aspects interact and affect language development in children. The options that suggest it is unchangeable, directly linked to language impairments, or that it can be improved through specific interventions do not adequately reflect the current understanding of this area in speech-language pathology. The complexities surrounding auditory memory and language acquisition indicate that more comprehensive studies are needed to draw definitive conclusions.

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://praxis5331form1.examzify.com

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