

SBVC Psychiatric Technician Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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

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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 statement may indicate a client is experiencing post-traumatic stress disorder after being raped?**
 - A. "I feel great and just want to move on."**
 - B. "I keep reliving the rape."**
 - C. "I'm not affected by it at all."**
 - D. "I think it was not that serious."**

- 2. Which anticonvulsant medication is associated with gingival hyperplasia?**
 - A. Carbamazepine**
 - B. Dilantin**
 - C. Valproic Acid**
 - D. Lamotrigine**

- 3. What brushing technique should be used for clients?**
 - A. Using hot water, firm toothbrush, brushing horizontally**
 - B. Using cold water, soft toothbrush, brushing in circular motions**
 - C. Using tepid water, a soft toothbrush, brushing at a 45-degree angle**
 - D. Using warm water, medium toothbrush, brushing straight up and down**

- 4. What intervention should be avoided when assisting a client who is having a grand mal seizure?**
 - A. Hold the client's head steady**
 - B. Provide a safe environment**
 - C. Put an object, such as a spoon, between the teeth**
 - D. Turn the client on their side**

- 5. What type of snack did Ken Davis choose from the refrigerator while on Nardil?**
 - A. Crackers**
 - B. Cheese**
 - C. Fruits**
 - D. Chocolate**

- 6. Which approach exemplifies the use of time-limited reinforcement in behavioral management?**
- A. Behavior modification charts**
 - B. Fixed interval reinforcement**
 - C. Group therapy sessions**
 - D. Timeout procedures**
- 7. A patient allergic to Cogentin and Artane, who feels drowsy from Benadryl, is prescribed which medication for neck stiffness from antipsychotic use?**
- A. Symmetrel**
 - B. Cogentin**
 - C. Benadryl**
 - D. Artane**
- 8. What is one possible cause of an insulin reaction in a diabetic patient?**
- A. Consistent meal timings**
 - B. Skipping an insulin injection**
 - C. Regular exercise**
 - D. High compliance with diet**
- 9. Which complication is possible following a cerebrovascular accident?**
- A. Pneumonia**
 - B. Diabetes**
 - C. Pulmonary embolism**
 - D. Cardiac arrest**
- 10. What is the maintenance level dosage of lithium carbonate for a patient discharged for bipolar disorder?**
- A. 150mg t.i.d. or q.i.d.**
 - B. 300mg t.i.d. or q.i.d.**
 - C. 400mg t.i.d. or q.i.d.**
 - D. 600mg t.i.d. or q.i.d.**

Answers

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

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Explanations

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1. Which statement may indicate a client is experiencing post-traumatic stress disorder after being raped?

- A. "I feel great and just want to move on."
- B. "I keep reliving the rape."**
- C. "I'm not affected by it at all."
- D. "I think it was not that serious."

The statement indicating that a client may be experiencing post-traumatic stress disorder (PTSD) after being raped is one where the individual expresses the feeling of reliving the trauma. This symptom, known as re-experiencing, is a hallmark feature of PTSD. Individuals dealing with this disorder often have intrusive memories, flashbacks, or nightmares about the traumatic event, leading them to feel as though they are reliving the experience. This can cause significant distress and impairment in their daily functioning. Other statements, such as expressing feelings of moving on or indicating that they are not affected, may reflect avoidance or denial mechanisms. While these can be defense strategies in the aftermath of trauma, they are not indicative of the symptoms specific to PTSD, which is characterized by persistent re-experiencing of the trauma, emotional numbing, and heightened arousal or anxiety responses.

2. Which anticonvulsant medication is associated with gingival hyperplasia?

- A. Carbamazepine
- B. Dilantin**
- C. Valproic Acid
- D. Lamotrigine

The association of gingival hyperplasia with certain anticonvulsant medications is particularly noted with phenytoin, commonly known by its brand name, Dilantin. Gingival hyperplasia is a condition characterized by an overgrowth of gum tissue which can occur as a side effect of long-term phenytoin treatment. This side effect is believed to be related to the drug's impact on the metabolism of certain factors involved in gum tissue growth. Phenytoin is often prescribed for the management of seizures and works by stabilizing the electrical activity in the brain. The risk of gingival hyperplasia is a significant consideration for patients on long-term phenytoin therapy, and healthcare providers often recommend regular dental check-ups and good oral hygiene practices to mitigate this side effect. While Carbamazepine, Valproic Acid, and Lamotrigine are also used as anticonvulsants, they are not typically associated with gingival hyperplasia in the same way.

- 3. What brushing technique should be used for clients?**
- A. Using hot water, firm toothbrush, brushing horizontally**
 - B. Using cold water, soft toothbrush, brushing in circular motions**
 - C. Using tepid water, a soft toothbrush, brushing at a 45-degree angle**
 - D. Using warm water, medium toothbrush, brushing straight up and down**

The technique of using tepid water, a soft toothbrush, and brushing at a 45-degree angle is recommended for clients due to its effectiveness in maintaining oral health while being gentle on the gums. The use of soft bristles helps minimize any irritation to the gums and enamel, making it suitable for individuals who may have sensitive teeth or gum conditions. Brushing at a 45-degree angle allows for better access to the gum line and helps to remove plaque effectively from both the teeth and the gums. This angle is particularly important as it promotes a more efficient cleaning method, reducing the risk of gum disease and cavities. Tepid water is optimal because it is comfortable for most individuals and encourages consistent brushing habits. This technique is widely endorsed by dental professionals as it aligns with best practices for oral hygiene, ensuring that clients can maintain their dental health effectively.

- 4. What intervention should be avoided when assisting a client who is having a grand mal seizure?**
- A. Hold the client's head steady**
 - B. Provide a safe environment**
 - C. Put an object, such as a spoon, between the teeth**
 - D. Turn the client on their side**

When assisting a client who is experiencing a grand mal seizure, putting an object, such as a spoon, between the teeth is highly discouraged because it can lead to several dangerous consequences. This action poses a significant risk of injury both to the client and to the person providing assistance. Inserting any object into the mouth during a seizure can cause dental damage, result in choking, or lead to the possibility of breaking teeth. Additionally, it may also increase the risk of causing trauma to the client's gums and oral cavity. During a grand mal seizure, it's important for caregivers to focus on ensuring safety and preventing potential harm. This includes positioning the client properly, using supportive measures to ensure they are comfortable and free from hazards, and closely monitoring them until the seizure subsides. Taking preventative measures such as protecting the client's head and turning them on their side can help minimize the risk of aspiration and facilitate breathing during and after the seizure. Remember, ensuring the client's safety is paramount, and using objects inappropriately can compromise their wellbeing.

5. What type of snack did Ken Davis choose from the refrigerator while on Nardil?

- A. Crackers**
- B. Cheese**
- C. Fruits**
- D. Chocolate**

Ken Davis's choice of snack while on Nardil is significant due to the dietary restrictions associated with Monoamine Oxidase Inhibitors (MAOIs) like Nardil. When taking Nardil, it is important to avoid foods that are high in tyramine, as this can lead to potentially dangerous hypertensive crises. Crackers are generally a safe snack option that does not contain tyramine, making it a suitable choice for someone on Nardil. In contrast, cheese, particularly aged cheeses, can have high levels of tyramine and should typically be avoided by individuals taking this medication. Fruits, while generally safe, may still pose some risks depending on the type and ripeness, as certain dried fruits are also high in tyramine. Chocolate contains moderate levels of tyramine, which could lead to complications for someone on Nardil. Thus, Ken's choice of crackers demonstrates an understanding of the dietary precautions required when taking Nardil, making it the most appropriate snack.

6. Which approach exemplifies the use of time-limited reinforcement in behavioral management?

- A. Behavior modification charts**
- B. Fixed interval reinforcement**
- C. Group therapy sessions**
- D. Timeout procedures**

The choice of fixed interval reinforcement exemplifies the use of time-limited reinforcement in behavioral management because it provides rewards or reinforcement after a specific period of time has elapsed. This approach is structured, as it allows individuals to receive reinforcement at regular intervals, thereby encouraging the repetition of desired behaviors within those time frames. In this model, once the set interval ends, any behavior that has been performed during that time can be reinforced if it aligns with the desired outcomes. It instills a clear understanding of when to expect reinforcement, motivating individuals to engage in the desired behavior consistently until the reinforcement is provided. This predictability can enhance learning and behavior modification. Other options do not specifically align with this concept. Behavior modification charts might organize behaviors and rewards but do not inherently include a time component. Group therapy sessions focus on interaction and discussion rather than structured reinforcement. Timeout procedures are designed as a punishment or to decrease undesirable behavior, rather than reinforcing positive behavior within a defined time frame.

7. A patient allergic to Cogentin and Artane, who feels drowsy from Benadryl, is prescribed which medication for neck stiffness from antipsychotic use?

A. Symmetrel

B. Cogentin

C. Benadryl

D. Artane

The correct medication for treating neck stiffness due to antipsychotic use in this scenario is Symmetrel. This medication, also known as amantadine, is an antiparkinsonian drug that can be effective in alleviating the extrapyramidal symptoms associated with antipsychotic medications, including neck stiffness or rigidity. In the context provided, the patient has allergies to Cogentin (trihexyphenidyl) and Artane (trihexyphenidyl), both of which are anticholinergic medications commonly used to treat such symptoms. Given the patient's allergies, prescribing these medications would not be appropriate or safe. Additionally, while Benadryl (diphenhydramine) can help manage some extrapyramidal symptoms due to its anticholinergic properties, the patient experiences drowsiness from it, making it an unsuitable option as well. Symmetrel is a preferable choice because it does not have the same anticholinergic side effects and can offer effective relief from the stiffness without the concern of allergic reactions or exacerbating drowsiness, thus making it the optimal alternative in this case.

8. What is one possible cause of an insulin reaction in a diabetic patient?

A. Consistent meal timings

B. Skipping an insulin injection

C. Regular exercise

D. High compliance with diet

An insulin reaction, often referred to as hypoglycemia, occurs when blood glucose levels drop too low. One significant cause of this condition is skipping an insulin injection, which can lead to an imbalance between the amount of insulin in the body and the amount of glucose present in the bloodstream. When a diabetic patient fails to administer their regular dose of insulin, especially if they have been managing their condition with a particular dose and timing, their blood sugar levels may not be adequately controlled, leading to severe fluctuations. In this context, skipping an insulin injection prevents the necessary regulation of blood glucose, particularly if the patient has consumed their usual meals or engaged in other activities that could lower blood sugar. This mismatch can result in a rapid decrease in glucose levels, consequently leading to symptoms associated with hypoglycemia, such as sweating, shaking, confusion, and even loss of consciousness if not addressed promptly. In contrast, maintaining consistent meal timings, regular exercise, and high compliance with dietary recommendations typically aid in blood sugar control and, when managed properly, are less likely to contribute to an insulin reaction.

9. Which complication is possible following a cerebrovascular accident?

- A. Pneumonia**
- B. Diabetes**
- C. Pulmonary embolism**
- D. Cardiac arrest**

Following a cerebrovascular accident (CVA), or stroke, the risk of complications increases significantly due to the potential for reduced mobility, impaired swallow reflex, and the overall impact on the body's systems. Among the various complications, pulmonary embolism is a notable concern. When a patient suffers a stroke, they may experience reduced mobility, leading to prolonged bed rest. This immobility can result in venous stasis, which is a condition where blood flow in the veins slows down. When blood flow is sluggish, it increases the risk of deep vein thrombosis (DVT), which can lead to clots formed in the deep veins of the legs or other areas. If a clot dislodges, it can travel to the lungs, resulting in a pulmonary embolism — a serious and potentially life-threatening condition. While pneumonia is certainly a concern due to an increased risk of aspiration and weakened respiratory function, diabetes and cardiac arrest, although they can occur in stroke patients, are not direct complications specifically tied to the aftermath of a cerebrovascular accident in the same way that pulmonary embolism is related to immobility and clot formation. Understanding the immediate and long-term risks following a stroke can help guide preventive strategies and interventions in clinical practice.

10. What is the maintenance level dosage of lithium carbonate for a patient discharged for bipolar disorder?

- A. 150mg t.i.d. or q.i.d.**
- B. 300mg t.i.d. or q.i.d.**
- C. 400mg t.i.d. or q.i.d.**
- D. 600mg t.i.d. or q.i.d.**

The maintenance level dosage of lithium carbonate for a patient with bipolar disorder typically falls in the range of 300mg to 600mg per day. Lithium is used to manage mood stabilizing effects, and after the acute phase of treatment, the maintenance dosage is crucial to prevent relapses. A dosage of 300mg taken three times a day (t.i.d.) or four times a day (q.i.d.) is commonly recognized as effective for sustaining therapeutic lithium levels in the body while minimizing side effects. This particular dosage helps maintain a serum lithium concentration that effectively stabilizes mood without crossing into toxicity, which could occur with higher dosages. Higher dosages, such as 400mg or 600mg t.i.d. or q.i.d., are generally not necessary for maintenance once the patient is stabilized. Therefore, the choice of 300mg as the maintenance dosage aligns with standard clinical practices for managing bipolar disorder effectively.

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://sbvcpsychiatrictech.examzify.com>

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

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