

SG CSD Prequalifying Exam Practice (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. A baseline condition demonstrates a predictable pattern that can be compared with the intervention. Which term fits the blank?**
 - A. Control**
 - B. Baseline**
 - C. Treatment**
 - D. Experimental**

- 2. In a cochlear implant, which component is implanted inside the cochlea to stimulate the auditory nerve?**
 - A. External sound processor**
 - B. Microphone**
 - C. Electrode array**
 - D. Receiver**

- 3. Which term is used to describe a phonological disorder classification indicating instability of errors across contexts?**
 - A. Inconsistent phonological disorder**
 - B. Consistent phonological disorder**
 - C. Articulation disorder**
 - D. Phonological delay**

- 4. Which memory subtype concerns facts and knowledge such as names?**
 - A. Episodic memory**
 - B. Explicit (declarative) memory**
 - C. Prospective memory**
 - D. Working memory**

- 5. In what stage of phonological development do pre-linguistic children start to coo?**
 - A. Stage 3 (3 - 8 months)**
 - B. Stage 1 (0 - 2 months)**
 - C. Stage 4 (5 - 10 months)**
 - D. Stage 2 (1 - 4 months)**

- 6. An air-bone gap is defined as which of the following?**
- A. Air conduction thresholds are equal to bone conduction thresholds**
 - B. Bone conduction threshold is 15 dB or more poorer than air conduction**
 - C. Air conduction threshold is 15 dB or more poorer than bone conduction**
 - D. There is never an air-bone gap**
- 7. The two primary components of the WHO-ICF are:**
- A. Functioning and disability; personal factors**
 - B. Functioning and disability; contextual factors**
 - C. Body function/structure; environmental factors**
 - D. Activity/participation; contextual factors**
- 8. What is the purpose of bone conduction testing?**
- A. Bypass outer and middle ear to test cochlear function**
 - B. Assess outer ear canal resonance**
 - C. Test tympanic membrane mobility**
 - D. Measure auditory nerve conduction**
- 9. Which factor influences Maximum Phonation Time (MPT)?**
- A. The color of the vocal fold tissue.**
 - B. The patient's lung capacity, age, sex, size, and health.**
 - C. The average airflow rate during phonation.**
 - D. The subglottal pressure range.**
- 10. Globus means what?**
- A. Dry mouth**
 - B. Altered taste**
 - C. No teeth**
 - D. Sensation of something stuck in your throat**

Answers

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

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Explanations

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1. A baseline condition demonstrates a predictable pattern that can be compared with the intervention. Which term fits the blank?

A. Control

B. Baseline

C. Treatment

D. Experimental

The main idea is establishing a reference point before any treatment is applied. A baseline condition shows the stable, predictable pattern of the target behavior without the intervention, providing a standard against which any changes due to the intervention can be measured. This helps determine whether the intervention truly alters the behavior beyond natural fluctuations. If you're thinking about the other terms: the intervention itself is the treatment, not the pre-intervention pattern. The experimental label refers to the overall study design rather than a specific phase. The term control implies a comparison condition used to isolate effects, but the description specifically points to the pre-treatment pattern, which is the baseline.

2. In a cochlear implant, which component is implanted inside the cochlea to stimulate the auditory nerve?

A. External sound processor

B. Microphone

C. Electrode array

D. Receiver

The part implanted inside the cochlea that stimulates the auditory nerve is the electrode array. It is inserted into the cochlea during surgery and delivers electrical pulses to the nerve fibers, bypassing damaged hair cells and preserving the cochlea's frequency layout by stimulating different regions along its length. The other components work outside or connect to this implanted piece: an external sound processor and microphone capture sound and send encoded signals to an implanted receiver/stimulator under the skin, which then powers the electrode array.

3. Which term is used to describe a phonological disorder classification indicating instability of errors across contexts?

- A. Inconsistent phonological disorder**
- B. Consistent phonological disorder**
- C. Articulation disorder**
- D. Phonological delay**

This topic asks you to recognize how phonological disorders can be described by how stable a child's error patterns are across different speaking situations. The term in question captures the idea that a child's misarticulations aren't fixed: the same target sound can be produced differently in different words or contexts, even within the same session. In other words, the errors are inconsistent: you might hear one production in one context and a different one in another, or the same word can be produced correctly on some attempts and incorrectly on others. This variability distinguishes this classification from other phonological or articulation issues. If errors were consistent across contexts, the clinician would describe a stable pattern, not an inconsistent one. An articulation disorder typically involves a relatively motor-based difficulty with a limited set of speech sounds and tends to be more stable. A phonological delay reflects a slower developmental trajectory of typical sound patterns rather than erratic variability. So, the best term for instability of errors across contexts is inconsistent phonological disorder.

4. Which memory subtype concerns facts and knowledge such as names?

- A. Episodic memory**
- B. Explicit (declarative) memory**
- C. Prospective memory**
- D. Working memory**

The main idea is conscious, reportable knowledge. Facts and knowledge you can recall, like names, fall under explicit (declarative) memory. This type includes the ability to consciously retrieve semantic memory—the general knowledge and facts you know—along with episodic memory for personal events. Names are general knowledge about people, not tied to a specific personal memory, so they fit semantic memory within the explicit/declarative system. In contrast, episodic memory is about personal experiences, prospective memory is about remembering to do things in the future, and working memory is about holding and manipulating information in the moment.

5. In what stage of phonological development do pre-linguistic children start to coo?

- A. Stage 3 (3 - 8 months)**
- B. Stage 1 (0 - 2 months)**
- C. Stage 4 (5 - 10 months)**
- D. Stage 2 (1 - 4 months)**

Coos are early vowel-like vocalizations that signal a move from purely reflexive sounds to more purposeful vocal output. In this stage, infants begin to produce sustained, lighter, vowel-dominant sounds (often in response to social interaction) with relaxed vocal tract control. This period falls around one to four months, so cooing is typically part of Stage 2. It's distinct from the very first weeks, which are dominated by reflexive crying and vegetative noises, and from later stages that introduce consonant-like babbling and more complex sound play. Coos show the infant beginning to use the vocal apparatus in a more controlled way, laying the groundwork for later speech development.

6. An air-bone gap is defined as which of the following?

- A. Air conduction thresholds are equal to bone conduction thresholds**
- B. Bone conduction threshold is 15 dB or more poorer than air conduction**
- C. Air conduction threshold is 15 dB or more poorer than bone conduction**
- D. There is never an air-bone gap**

The key idea is the difference between how sound is detected through air and through bone. The air-conduction pathway passes through the outer and middle ear, so problems there raise AC thresholds. The bone-conduction pathway bypasses the outer/middle ear and reflects inner ear function, so BC thresholds stay relatively stable unless there's a sensorineural issue. An air-bone gap is defined when air-conduction thresholds are 15 dB or more poorer than bone-conduction thresholds. This gap indicates a conductive component to the hearing loss, because the outer or middle ear is impairing air conduction while inner-ear function (as shown by bone conduction) is comparatively better. If AC and BC are the same, there's no gap and no conductive component. If BC were poorer than AC by 15 dB or more, that isn't the standard definition of an air-bone gap and would suggest an atypical pattern.

7. The two primary components of the WHO-ICF are:

- A. Functioning and disability; personal factors**
- B. Functioning and disability; contextual factors**
- C. Body function/structure; environmental factors**
- D. Activity/participation; contextual factors**

The main idea this item tests is how the WHO-ICF is structured into two broad parts: Functioning and Disability, and Contextual Factors. Functioning and Disability covers what a person can do and experiences, including the domains of body functions/structures and activities/participation. Contextual Factors include factors in the person and their environment that can influence functioning, namely environmental factors and personal factors. So the two primary components are Functioning and Disability and Contextual Factors. The other options mix elements that are part of those broad components (like body structures or environmental factors) rather than naming the two big parts) and thus don't reflect the ICF's overall organization.

8. What is the purpose of bone conduction testing?

- A. Bypass outer and middle ear to test cochlear function**
- B. Assess outer ear canal resonance**
- C. Test tympanic membrane mobility**
- D. Measure auditory nerve conduction**

Bone conduction testing bypasses the outer and middle ear to test cochlear function by delivering vibrations directly to the inner ear. This method uses a bone oscillator on the skull, so sound reaches the cochlea without needing the ear canal or tympanic membrane to move. It's especially useful for distinguishing conductive from sensorineural hearing loss: if bone-conduction thresholds are normal while air-conduction thresholds are reduced, the issue is likely in the outer or middle ear; if both are reduced, the problem is sensorineural. It isn't used to assess outer ear resonance, tympanic membrane mobility, or direct neural conduction of the auditory nerve.

9. Which factor influences Maximum Phonation Time (MPT)?

- A. The color of the vocal fold tissue.**
- B. The patient's lung capacity, age, sex, size, and health.**
- C. The average airflow rate during phonation.**
- D. The subglottal pressure range.**

Sustaining phonation on one breath depends on how much air you have available and how efficiently you can use it. Maximum Phonation Time reflects the respiratory support behind the voice, so the factor that best influences it is the person's lung capacity, along with how age, sex, body size, and overall health shape that capacity. A larger lung capacity means more air to push through the vocal folds for a longer period, while age, sex, size, and health determine typical lung volumes and how well the respiratory system can supply and control that air. The color of the vocal fold tissue doesn't affect how long you can sustain phonation. The average airflow rate during phonation describes how quickly air leaves, not how long it can be sustained. Subglottal pressure range matters for voice quality and ease of phonation, but the fundamental limit on duration is the amount of air you can breath in and efficiently use.

10. Globus means what?

- A. Dry mouth
- B. Altered taste
- C. No teeth
- D. Sensation of something stuck in your throat**

Globus describes a persistent, non-painful sensation of a lump or foreign body in the throat, even when there isn't any actual obstruction. That's why the correct description is the feeling of something stuck in your throat. It's a common, usually harmless symptom often linked to throat muscle tension, reflux, or anxiety, and people can usually swallow normally despite the sensation. Dry mouth is a problem of saliva, altered taste is a change in taste, and no teeth relates to the mouth's anatomy, not the throat sensation. If the symptom is ongoing or accompanied by red flags like weight loss or difficulty swallowing liquids, further evaluation may be needed.

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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://sgcsdprequalifying.examzify.com>

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

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