

TECHNICIAN DEVELOPMENT PROGRAM I PRACTICE EXAM (SAMPLE)

STUDY GUIDE



Prepare with structure. Pass with confidence



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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 professional is NOT authorized to prescribe medications?**
 - A. Podiatrist
 - B. Osteopath
 - C. Registered nurse
 - D. Dentist

- 2. In the LOTO sequence, which action should occur immediately after identifying the energy source and obtaining authorization?**
 - A. Notify affected personnel
 - B. Shut down and isolate energy
 - C. Apply lockout devices
 - D. Verify zero energy

- 3. Days supply is calculated by which method?**
 - A. Multiply total quantity by daily dosage
 - B. Divide total quantity by daily dosage
 - C. Add daily dosage to total quantity
 - D. Subtract daily dosage from total quantity

- 4. In a parallel circuit with $6\ \Omega$ and $3\ \Omega$ resistors across a 6 V source, what is the current through each branch?**
 - A. $I_{6\Omega} = 2\text{ A}$; $I_{3\Omega} = 1\text{ A}$
 - B. $I_{6\Omega} = 0.5\text{ A}$; $I_{3\Omega} = 1.5\text{ A}$
 - C. $I_{6\Omega} = 1\text{ A}$; $I_{3\Omega} = 2\text{ A}$
 - D. $I_{6\Omega} = 1.5\text{ A}$; $I_{3\Omega} = 0.5\text{ A}$

- 5. Which telephone call should a technician NOT handle?**
 - A. Patient confirming that their prescription is ready
 - B. Nurse calling in a change of directions
 - C. Patient requesting a refill on an existing prescription
 - D. Patient calling to check the price of a medication

6. What quantity should be dispensed for this prescription? Diphenhydramine syrup (Benadryl). SIG: 2 TSP 2-3 TIMES DAILY FOR 7 DAYS.
- A. 140 ML
 - B. 200 ML
 - C. 70 ML
 - D. 210 ML
7. What is a common failure mode for rolling-element bearings?
- A. Bearings fail only due to corrosion.
 - B. Wear and spalling due to overload, contamination, or improper lubrication.
 - C. Bearings never fail.
 - D. Electrical overheating.
8. What is the correct quantity to be dispensed on the following prescription? Prednisone 10mg tablet; Sig: 2 tabs QID X three days, then 1 tab QID X two days, then 1 tab QD X two days
- A. 10 tablets
 - B. 34 tablets
 - C. 24 tablets
 - D. 14 tablets
9. A 15 mL Timolol bottle dispensed with instruction 2 gtts OU q12h will provide supply for approximately which days?
- A. 37 days
 - B. 50 days
 - C. 75 days
 - D. 28 days
10. The prescription direction I GTT OU HS means which of the following?
- A. Instill 1 drop in both eyes at bedtime
 - B. Instill 1 drop in the left eye in the evening
 - C. Instill 1 drop with meals
 - D. Instill 1 drop in the morning

Answers

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

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Explanations

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1. Which professional is NOT authorized to prescribe medications?

- A. Podiatrist
- B. Osteopath
- C. Registered nurse**
- D. Dentist

Prescriptive authority is tied to each professional's formal scope of practice. Some health care providers have explicit permission to prescribe medications as part of their role, such as dentists, podiatrists, and osteopathic physicians, who can manage medications relevant to their fields. A registered nurse, on the other hand, generally does not have independent prescription authority. RNs administer medications and carry out prescribed treatment plans, but prescribing is typically reserved for physicians or specialized advanced practice providers (like nurse practitioners) who have the appropriate licensure and oversight. In everyday practice, this is why the registered nurse is not authorized to prescribe medications.

2. In the LOTO sequence, which action should occur immediately after identifying the energy source and obtaining authorization?

- A. Notify affected personnel
- B. Shut down and isolate energy**
- C. Apply lockout devices
- D. Verify zero energy

When you've identified the energy source and obtained authorization, the next move is to bring the equipment to a safe state by shutting it down and isolating the energy. This step stops any ongoing energy flow and prevents the machine from starting up unexpectedly or releasing stored energy while someone is working on it. By de-energizing and isolating, you create a true safe baseline so the subsequent lockout devices can effectively hold that state and keep energy from re-entering the system. After this, you would apply the lockout devices to maintain the isolation and then verify zero energy, including any stored energy, before work begins. Notifying affected personnel is important, but it's not the immediate action that establishes the safe condition.

3. Days supply is calculated by which method?

- A. Multiply total quantity by daily dosage
- B. Divide total quantity by daily dosage**
- C. Add daily dosage to total quantity
- D. Subtract daily dosage from total quantity

Days supply tells you how long a given quantity will last based on daily use. It is found by dividing the total quantity by the daily dosage. For example, if you have 60 tablets and take 3 per day, the days supply is $60 \div 3 = 20$ days. Multiplying the total quantity by the daily dosage would give a total amount used, not how long the supply lasts; adding or subtracting the daily amount from the total doesn't translate to days of use. Division directly converts quantity into days of use.

4. In a parallel circuit with $6\ \Omega$ and $3\ \Omega$ resistors across a 6 V source, what is the current through each branch?

- A. $I_{6\Omega} = 2\text{ A}$; $I_{3\Omega} = 1\text{ A}$
- B. $I_{6\Omega} = 0.5\text{ A}$; $I_{3\Omega} = 1.5\text{ A}$
- C. $I_{6\Omega} = 1\text{ A}$; $I_{3\Omega} = 2\text{ A}$
- D. $I_{6\Omega} = 1.5\text{ A}$; $I_{3\Omega} = 0.5\text{ A}$

In a parallel circuit, each branch has the full source voltage across it, so use $I = V/R$ for each resistor. With 6 V across both branches, the $6\ \Omega$ resistor carries $6\text{ V} / 6\ \Omega = 1\text{ A}$, and the $3\ \Omega$ resistor carries $6\text{ V} / 3\ \Omega = 2\text{ A}$. The total current drawn from the source is $1\text{ A} + 2\text{ A} = 3\text{ A}$, which matches the source and the combined resistance ($R_{eq} = (1/6 + 1/3)^{-1} = 2\ \Omega$, and $6\text{ V} / 2\ \Omega = 3\text{ A}$). So the currents are 1 A through the $6\ \Omega$ branch and 2 A through the $3\ \Omega$ branch.

5. Which telephone call should a technician NOT handle?

- A. Patient confirming that their prescription is ready
- B. Nurse calling in a change of directions
- C. Patient requesting a refill on an existing prescription
- D. Patient calling to check the price of a medication

A technician's call-handling role centers on routine, non-therapeutic tasks that can be performed under pharmacist supervision. It's appropriate for a tech to tell a patient their prescription is ready, process a refill on an existing prescription, or provide price information. What requires a pharmacist's professional judgment and authorization is any change to how a prescription is used—such as altering directions or dosage. Those changes can affect patient safety and drug therapy, so they must be reviewed and approved by a pharmacist before the order is modified. So, when a nurse calls to request a change of directions, that falls outside what a technician should handle and should be escalated to the pharmacist for approval. The other scenarios align with a technician's scope: confirming readiness, handling a refill, and providing price information.

6. What quantity should be dispensed for this prescription? Diphenhydramine syrup (Benadryl). SIG: 2 TSP 2-3 TIMES DAILY FOR 7 DAYS.

- A. 140 ML
- B. 200 ML
- C. 70 ML
- D. 210 ML

Total quantity to dispense should cover all doses for the entire treatment period given the dose per administration and how often it's taken. Diphenhydramine syrup is dosed as 2 teaspoons per administration. Two teaspoons is 10 milliliters. If the patient could take up to 3 doses per day for 7 days, that's $10\text{ mL per dose} \times 3\text{ doses/day} = 30\text{ mL per day}$. Over 7 days, $30\text{ mL/day} \times 7\text{ days} = 210\text{ mL}$. So the amount dispensed should be 210 mL to ensure enough supply for the full course, even at the maximum dosing. The other options would not supply enough for the entire 7 days at the maximum frequency.

7. What is a common failure mode for rolling-element bearings?

- A. Bearings fail only due to corrosion.
- B. Wear and spalling due to overload, contamination, or improper lubrication.**
- C. Bearings never fail.
- D. Electrical overheating.

Rolling-element bearings most commonly fail due to surface fatigue and wear caused by overload, contamination, or improper lubrication. When a bearing goes beyond its design load, or when dirt and moisture get in, or when the lubricant isn't adequate or clean, the protective film between bearing surfaces breaking down leads to metal-to-metal contact, abrasive wear, and the initiation of microcracks. These cracks grow with each revolution, causing spalling (chips of material flaking off) and progressive wear that raise friction, heat, vibration, and noise until the bearing eventually fails. Corrosion and electrical overheating can cause degradation, but they're not the typical primary failure mode in properly maintained systems.

**8. What is the correct quantity to be dispensed on the following prescription?
Prednisone 10mg tablet; Sig: 2 tabs QID X three days, then 1 tab QID X two days, then 1 tab QD X two days**

- A. 10 tablets
- B. 34 tablets**
- C. 24 tablets
- D. 14 tablets

The key idea is to tally every tablet you'll take across the entire taper, based on how often you take it each day. QID means four doses per day. For the first phase: 2 tablets per dose, four times a day, for three days. That's $2 \times 4 \times 3 = 24$ tablets. In the second phase: 1 tablet per dose, four times a day, for two days. That's $1 \times 4 \times 2 = 8$ tablets. In the final phase: 1 tablet per day for two days. That's $1 \times 1 \times 2 = 2$ tablets. Add them up: $24 + 8 + 2 = 34$ tablets. So the total quantity to dispense is 34 tablets.

9. A 15 mL Timolol bottle dispensed with instruction 2 gtts OU q12h will provide supply for approximately which days?

- A. 37 days
- B. 50 days
- C. 75 days
- D. 28 days**

The calculation hinges on how many drops you get from the bottle and how many drops you use each day. A standard ophthalmic drop is about 0.05 mL, and there are roughly 20 drops per milliliter, so a 15 mL bottle contains about 300 drops. The order says two drops to both eyes (OU) every 12 hours. That means at each dosing time you administer two drops total, and you do this twice a day, so you use 4 drops per day. Days of supply = total drops in the bottle ÷ drops used per day = $300 \div 4 = 75$ days. Alternatively, $4 \text{ drops/day} \times 0.05 \text{ mL/drop} = 0.2 \text{ mL/day}$; $15 \text{ mL} \div 0.2 \text{ mL/day} = 75 \text{ days}$. The supply lasts about 75 days.

10. The prescription direction I GTT OU HS means which of the following?

- A. Instill 1 drop in both eyes at bedtime
- B. Instill 1 drop in the left eye in the evening
- C. Instill 1 drop with meals
- D. Instill 1 drop in the morning

One drop in each eye at bedtime. I GTT OU HS uses standard ophthalmic abbreviations: I means one, GTT stands for guttae (drops), OU means oculi uterque (both eyes), and HS stands for hora somni (at bedtime). So together they instruct you to put one drop into both eyes right before sleep. The other options would require different abbreviations (for example, OS for left eye only, or a morning or meals timing) and do not match OU HS.

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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://techniciandevprogram1.examzify.com>

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

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