

The Praxis™ Study Companion

Audiology

0342/5342



Welcome to *The Praxis™ Study Companion*

Prepare to Show What You Know

You have gained the knowledge and skills you need for your teaching career. Now you are ready to demonstrate your abilities by taking a *Praxis™* test.

Using *The Praxis Study Companion* is a smart way to prepare for the test so you can do your best on test day. This guide can help keep you on track and make the most efficient use of your study time.

The Study Companion contains practical information and helpful tools including:

- An overview of the tests
- Specific information on the *Praxis* test you are taking
- A template study plan
- Practice questions and explanations of correct answers
- Test-taking tips and strategies
- Frequently asked questions
- Links to more detailed information

So where should you start? Begin by reviewing this guide in its entirety and note those sections that you need to revisit. Then you can create your own personalized study plan and schedule based on your individual needs and how much time you have before test day.

Keep in mind that study habits are individual. There are many different ways to successfully prepare for your test. Some people study better on their own, while others prefer a group dynamic. You may have more energy early in the day, but another test taker may concentrate better in the evening. So use this guide to develop the approach that works best for you.

Your teaching career begins with preparation. Good luck!

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1. Know What to Expect

Familiarize yourself with the Praxis tests so you know what to expect

Which test should I take?

Each state or agency that uses the *Praxis* tests sets its own requirements for which test or tests you must take for the teaching area you wish to pursue.

Before you register for a test, confirm your state or agency's testing requirements at www.ets.org/praxis/states.

How are the *Praxis* tests given?

Praxis I® and *Praxis II*® tests are given in both computer and paper formats. **Note:** Not all *Praxis II* tests are offered in both formats.

Should I take the computer- or paper-delivered test?

You should take the test in whichever format you are most comfortable. Some test takers prefer taking a paper-and-pencil test, while others are more comfortable on a computer. Please note that not all tests are available in both formats.

If I'm taking more than one *Praxis* test, do I have to take them all in the same format?

No. You can take each test in the format in which you are most comfortable.

Is there a difference between the subject matter covered on the computer-delivered test and the paper-delivered test?

No. The computer-delivered test and paper-delivered test cover the same content.

Where and when are the *Praxis* tests offered?

You can select the test center that is most convenient for you. The *Praxis* tests are administered through an international network of test centers, which includes some universities, high schools, Prometric® Testing Centers, and other locations throughout the world.

Testing schedules depend on whether you are taking computer-delivered tests or paper-delivered tests. See the *Praxis* website for more detailed test registration information at www.ets.org/praxis/register.

2. Familiarize Yourself with Test Questions

Become comfortable with the types of questions you'll find on the Praxis tests

The *Praxis* tests include two types of questions — **multiple-choice** (for which you select your answers from a list of choices) and **constructed-response** (for which you write a response of your own). You may be familiar with these question formats from taking other standardized tests. If not, familiarize yourself with them so you don't spend time during the test figuring out how to answer them.

Understanding Multiple-choice Questions

Many multiple-choice questions begin with the phrase “which of the following.” Take a look at this example:

Which of the following is a flavor made from beans?

- (A) Strawberry
- (B) Cherry
- (C) Vanilla
- (D) Mint

How would you answer this question?

All of the answer choices are flavors. Your job is to decide which of the flavors is the one made from beans.

Try following these steps to select the correct answer.

- 1) **Limit your answer to one of the choices given.** You may know that chocolate and coffee are also flavors made from beans, but they are not listed. Rather than thinking of other possible answers, focus only on the choices given (“which of the following”).
- 2) **Eliminate incorrect answers.** You may know that strawberry and cherry flavors are made from fruit and that mint flavor is made from a plant. That leaves vanilla as the only possible answer.
- 3) **Verify your answer.** You can substitute “vanilla” for the phrase “which of the following” and turn the question into this statement: “Vanilla is a flavor made from beans.” This will help you be sure that your answer is correct. If you're still uncertain, try substituting the other choices to see if they make sense. You may want to use this technique as you answer multiple-choice questions on the practice tests.

Try a more challenging example

The vanilla bean question is pretty straightforward, but you'll find that more challenging questions have a similar structure. For example:

Entries in outlines are generally arranged according to which of the following relationships of ideas?

- (A) Literal and inferential
- (B) Concrete and abstract
- (C) Linear and recursive
- (D) Main and subordinate

You'll notice that this example also contains the phrase "which of the following." This phrase helps you determine that your answer will be a "relationship of ideas" from the choices provided. You are supposed to find the choice that describes how entries, or ideas, in outlines are related.

Sometimes it helps to put the question in your own words. Here, you could paraphrase the question in this way: "How are outlines usually organized?" Since the ideas in outlines usually appear as main ideas and subordinate ideas, the answer is (D).

QUICK TIP: Don't be intimidated by words you may not understand. It might be easy to be thrown by words like "recursive" or "inferential." Read carefully to understand the question and look for an answer that fits. An outline is something you are probably familiar with and expect to teach to your students. So slow down, and use what you know.

Watch out for multiple-choice questions containing "NOT," "LEAST," and "EXCEPT."

This type of question asks you to select the choice that does not fit. You must be very careful because it is easy to forget that you are selecting the negative. This question type is used in situations in which there are several good solutions or ways to approach something, but also a clearly wrong way.

How to approach questions about graphs, tables, or reading passages

When answering questions about tables, graphs, or reading passages, provide only the information that the question asks for. In the case of a map or graph, you might want to read the questions first, and then look at the map or graph. In the case of a long reading passage, you might want to go ahead and read the passage, marking places you think are important, and then answer the questions. Again, the important thing is to be sure you answer the question as it refers to the material presented. So read the question carefully.

How to approach unfamiliar formats

New multiple-choice formats are developed from time to time to find new ways of assessing knowledge. If you see a format you are not familiar with, read the directions carefully. Then read and approach the question the way you would any other question, asking yourself what you are supposed to be looking for, and what details are given in the question that help you find the answer.

Here is an example of a format you might not have encountered before:

Directions: The following question asks you to analyze teacher goals and actions intended to lead to the achievement of the goal. Decide whether the action makes it likely or unlikely to lead to the achievement of the goal.

GOAL: To increase the participation of low-achieving middle-school students in whole-class discussions.

ACTION: Instead of asking for volunteers, the teacher randomly calls on students to discuss homework assignments.

- (A) Likely, because students who feel anxiety about being called on will be more at ease and will pay more attention to class discussion.
- (B) Likely, because low-achieving students often hesitate to volunteer and random questioning will increase responses from these students.
- (C) Unlikely, because students in the middle-school grades prefer to have a choice in responding to discussions.
- (D) Unlikely, because students' positive feelings toward the teacher will decrease.

To answer this question correctly you must read the directions, which explain how the paragraph marked "GOAL," the paragraph marked "ACTION" and the answer choices fit together. The answer is (B) because it is the only action that is both "likely" to be successful and "likely" to be the right reason. To answer this question, first decide whether or not the action was likely to achieve the desired goal. Then select the reason. This two-part selection process brings you to your answer.

QUICK TIP: Don't make the questions more difficult than they are. Don't read for "hidden meanings" or "tricks." There are no "trick questions" on *Praxis* tests. They are intended to be serious, straightforward tests of your knowledge.

Understanding Constructed-response Questions

Constructed-response questions require you to demonstrate your knowledge in a subject area by providing in-depth explanations on particular topics. Essay and problem-solving are types of constructed-response questions.

For example, an essay question might present you with a topic and ask you to discuss the extent to which you agree or disagree with the opinion stated. You must support your position with specific reasons and examples from your own experience, observations, or reading.

Take a look at a few sample essay topics:

- "Celebrities have a tremendous influence on the young, and for that reason, they have a responsibility to act as role models."
- "We are constantly bombarded by advertisements—on television and radio, in newspapers and magazines, on highway signs and the sides of buses. They have become too pervasive. It's time to put limits on advertising."
- "Advances in computer technology have made the classroom unnecessary, since students and teachers are able to communicate with each other from computer terminals at home or at work."

A problem-solving question might ask you to solve a mathematics problem such as the one below and show how you arrived at your solution:

- a) In how many different ways can 700 be expressed as the product of two positive integers? Show how you arrived at your answer.
- b) Among all pairs of positive integers whose product is 700, which pair has the maximum greatest common divisor? Explain how you arrived at your answer.

Keep these things in mind when you respond to a constructed-response question

- 1) **Answer the question accurately.** Analyze what each part of the question is asking you to do. If the question asks you to describe or discuss, you should provide more than just a list.
- 2) **Answer the question completely.** If a question asks you to do three distinct things in your response, you should cover all three things for the best score. Otherwise, no matter how well you write, you will not be awarded full credit.
- 3) **Answer the question that is asked.** Do not change the question or challenge the basis of the question. You will receive no credit or a low score if you answer another question or if you state, for example, that there is no possible answer.
- 4) **Give a thorough and detailed response.** You must demonstrate that you have a thorough understanding of the subject matter. However, your response should be straightforward and not filled with unnecessary information.
- 5) **Reread your response.** Check that you have written what you thought you wrote. Be sure not to leave sentences unfinished or omit clarifying information.

QUICK TIP: You may find that it helps to circle each of the details of the question in your test book or take notes on scratch paper so that you don't miss any of them. Then you'll be sure to have all the information you need to answer the question.

For more detailed information on constructed-response scoring, see the Scoring Guide in the Test at a Glance section.

3. Understand Your Scores

Understand how tests are scored and how to interpret your test scores

Of course, passing the *Praxis* test is important to you so you need to understand what those scores mean and what your state requirements are.

What are the score requirements for my state?

States, institutions, and associations that require the tests set their own passing scores. Visit www.ets.org/praxis/states for the most up-to-date information.

If I move to another state, will my new state accept my scores?

The *Praxis Series* tests are part of a national testing program, meaning that they are required in more than one state for licensure. The advantage of a national program is that if you move to another state that also requires *Praxis* tests, you can transfer your scores. Each state has specific test requirements and passing scores that you can find at www.ets.org/praxis/states.

How do I know if I passed the test?

You will receive passing score information on your score report for the score recipients that you listed when you registered. If you test in a state with automatic score reporting, you will receive passing score information for that state.

A list of states and their passing scores for each test are available online at www.ets.org/praxis/states.

What your *Praxis* scores mean

You received your score report. Now what does it mean? It's important to interpret your score report correctly and to know what to do if you have questions about your scores.

Visit http://www.ets.org/s/praxis/pdf/sample_score_report.pdf to see a sample score report.

To access *Understanding Your Praxis Scores*, a document which provides additional information on how to read your score report, visit www.ets.org/praxis/scores/understand.

Put your scores in perspective

Your score report indicates:

- Your score and whether you passed
- The range of possible scores
- The raw points available in each content category
- The range of the middle 50 percent of scores on the test
- Your Recognition of Excellence (ROE) Award status, if applicable (found at www.ets.org/praxis/scores/understand/roe)

If you have taken the same test or other tests in *The Praxis Series* over the last 10 years, your score report also lists the highest score you earned on each test taken.

Content category scores and score interpretation

On many of the *Praxis* tests, questions are grouped into content categories. To help you in future study or in preparing to retake the test, your score report shows how many “raw points” you earned in each content category. Compare your “raw points earned” with the maximum points you could have earned (“raw points available”). The greater the difference, the greater the opportunity to improve your score by further study.

Score scale changes

ETS updates *Praxis* tests on a regular basis to ensure they accurately measure the knowledge and skills that are required for licensure. Updated tests cover the same content as the previous tests. However, scores might be reported on a different scale, so requirements may vary between the new and previous versions. All scores for previous, discontinued tests are valid and reportable for 10 years.

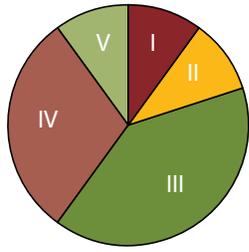
These resources may also help you interpret your scores:

- *Understanding Your Praxis Scores* (PDF), found at www.ets.org/praxis/scores/understand
- *The Praxis Series Passing Scores* (PDF), found at www.ets.org/praxis/scores/understand
- State requirements, found at www.ets.org/praxis/states

4. Learn About Your Test

Learn about the specific test you will be taking

Audiology (0342/5342)

Test at a Glance			
Test Name	Audiology		
Test Code	0342	5342	
Time	2 hours	2 hours	
Number of Questions	120	120	
Format	Multiple-choice questions	Multiple-choice questions	
Test Delivery	Paper delivered	Computer delivered	
	Content Categories	Approximate Number of Questions	Approximate Percentage of Examination
	I. Foundations	12	10%
	II. Prevention and Identification	12	10%
	III. Assessment	48	40%
	IV. Intervention	36	30%
	V. Professional Issues	12	10%

About This Test

The Audiology test measures knowledge important for independent practice as an audiologist in all primary employment settings, including schools, hospitals, clinics, private practice, etc. The examination is typically taken by examinees who are in or have completed a doctoral degree program that prepares individuals to enter professional practice. Recognized as the national examination in audiology, the test is one of several requirements for the Certificate of Clinical Competence issued by the American Speech-Language-Hearing Association (ASHA). Some states use the examination as part of the licensure procedure. Complete information is available about certification or licensure from the authority, state, or local agency from which certification or licensure is sought at ASHA: www.asha.org and 2200 Research Boulevard, Rockville, MD 20850.

The 120 multiple-choice test questions focus on content related to the major practice areas of prevention, identification, assessment, and intervention, together with foundational knowledge and knowledge of standards of professional practice. Application of knowledge is tested in the context of clinical case studies research results, and results of assessments (physiologic, behavioral, and other types of assessment). The content of the test is based on a practice and curriculum analysis commissioned by ASHA: a national survey of audiologists in both clinical and educational settings. This test may contain some questions that will not count toward your score.

Note: ETS recently changed the test code of the Praxis Audiology test to 0342/5342. While the content of the test has not changed, scores will now be reported on a 100-200 score scale in one-point increments. The required score for ASHA, the state boards of licensure, and departments of education on the new scale is 170 (equivalent to the required score of 600 on the former 250-990 scale). We recommend that students take the Audiology test during their final year of doctoral study. The exam is outcome-based and depends on the student being able to engage in clinical decision-making.

Topics Covered

Representative descriptions of topics covered in each category are provided below.

I. Foundations (10%)

- Acoustics/psychoacoustics
 - basic parameters of sound
 - principles of acoustics as related to speech sounds
 - sound measurement
 - psychoacoustic principles, methods, and applications
- Anatomy, physiology, and behavior over the life span
 - the auditory system
 - the balance system
 - neuroanatomy and neurophysiology
 - embryology and development of hearing and balance mechanisms
 - normal processes of auditory behavior over the life span
 - language and speech characteristics and their development over the life span
 - effects of hearing loss on language and speech, and on educational, vocational, social, and psychological functioning
- Etiology
 - genetics and associated syndromes related to hearing and balance
 - pathologies related to hearing and balance and their medical diagnosis and treatment
- Pharmacology, ototoxicity, and vestibulotoxicity
- Psychometrics and instrumentation
 - test construction principles
 - test reliability and validity
 - calibration of audiometric equipment
- Principles of counseling
- Cultural and linguistic diversity, including Deaf Culture

II. Prevention and Identification (10%)

Education and Prevention (Conservation)

- Informing clients about
 - causes and effects of hearing loss (congenital and acquired)

- causes and effects of vestibular disorders
- protection from hearing loss and vestibular disorders
- Universal precautions, including infection control and bioelectrical hazards
- Selecting and fitting hearing protection devices (HPDs)

Screening and Risk Assessment

- Selecting and administering procedures to identify individuals who require
 - further audiologic evaluation and/or treatment
 - referral for speech and/or language assessment
 - referral for other professional services
- Identifying individuals at risk for balance problems and falls who require further vestibular evaluation and/or treatment
- Newborn hearing screening programs (early hearing detection and intervention [EHDI])
- Selecting, administering, and interpreting self-report measures of hearing problems

III. Assessment (40%)

Assessment Planning

- Gathering and evaluating client information (case histories and information from referral sources) to facilitate assessment planning and identify potential etiologic factors
- Verifying proper functioning of assessment equipment
- Selecting and modifying procedures based on client factors; e.g., age, developmental level, functional status, behavior, cultural and linguistic diversity, physical, sensory, and cognitive abilities

Audiologic Evaluation – Behavioral

Administering and interpreting

- Pure-tone air and bone conduction testing
- Speech audiometry
- Tests for functional hearing loss
- Tests for children above 6 months developmental age; e.g., visual reinforcement audiometry and conditioned-play audiometry

Audiologic Evaluation – Physiologic

Administering and interpreting

- Immittance testing
 - tympanometry
 - acoustic reflex thresholds
 - reflex decay
- Otoacoustic emission (OAE) testing
- Auditory evoked potentials
 - Auditory brainstem response (ABR) testing
 - threshold testing with clicks
 - threshold testing with tone bursts
 - ABR bone conduction threshold testing
 - ABR for neurodiagnostic evaluation
 - Auditory steady state response (ASSR)

Other Assessments and Evaluations

Administering and interpreting

- Otoscopy: performing otoscopy and ensuring appropriate follow-up, including diagnostic evaluations, intervention, and referrals
- Self-report measures of hearing problems and their impact on daily living
- Balance system assessment; e.g.,
 - videonystagmography (VNG)
 - electronystagmography (ENG)
 - rotational tests
- Assessment of communication function; e.g.,
 - speech in noise testing
 - spatial testing
 - self-report measures
- Assessment of tinnitus; e.g.,
 - pitch matching
 - loudness matching
 - self-report measures
- Evaluating (central) auditory processes; e.g.,
 - gap detection
 - dichotic digits
 - filtered speech

Integrating Assessment Results

- Integrating assessments (behavioral, physiologic, neurodiagnostic, and other evaluations)
 - to establish type and severity of hearing loss
 - to support recommendations for further evaluation and/or referral

- Integrating balance function tests (e.g., VNG) with other results to evaluate balance function

Documentation and Communication

- Documenting the procedures and results of evaluations
- Generating recommendations based on evaluations, including referrals, as appropriate, to other audiologists and related professionals
- Communicating results and recommendations to relevant individuals (e.g., clients, caregivers, physicians, agencies) to coordinate a plan of action
- Interacting effectively with clients, families, other appropriate individuals, and professionals including working with interpreters (ASL and other languages, sign systems) to effectively communicate with clients

IV. Intervention (30%)

Treatment Planning

- Evaluating client information to facilitate treatment planning:
 - information from referral sources
 - case histories
- Selecting and modifying treatment procedures based on client factors; e.g., age, developmental level, functional status, behavior, cultural and linguistic diversity, physical, sensory, and cognitive abilities
- Integrating results of assessments and other evaluations to support recommendations for treatment and/or referral

Device Selection

- Evaluating client's perceived hearing handicap and expectations related to hearing devices
- Determining candidacy for and selecting:
 - hearing aids
 - other assistive listening and alerting devices
 - cochlear implant(s)
 - other implantable devices (e.g., bone-anchored hearing aids)
- Determining candidacy for and selecting:
 - hearing assistive technology system (HATS) for adults; e.g., personal and group amplification systems, assistive listening, and alerting devices
 - hearing assistive technology system (HATS) for children

Hearing Aids

- Evaluating, for the purpose of hearing aid selection,
 - speech recognition in noise
 - loudness discomfort
- Programming hearing aids
 - Hearing aid coupling; e.g., ear mold modifications, sound bore length, materials
 - Selecting features and processing strategies based on client communication needs; e.g.,
 - type of amplitude processing
 - feedback suppression
 - direct audio input

Cochlear Implants

- Programming cochlear implants
- Evaluating implant effectiveness and making appropriate modifications
- Selecting processing and programming strategies based on client communication needs

Device Verification and Validation

- Verifying proper functioning of hearing aids and other assistive devices
- Conducting quality control measures (e.g., electroacoustic measures, feature-specific probe microphone measures) on hearing technology
- Probe microphone verification for children; e.g.,
 - real ear to coupler difference (RECD)
 - aided thresholds
- Probe microphone verification for adults; e.g.,
 - real ear insertion gain (REIG)
 - real ear aided response (REAR)
 - real ear saturation response (RESR)
- Evaluating hearing technology effectiveness; e.g., outcome measures, aided speech recognition
- Repairing and modifying hearing technology devices, when appropriate

Audiologic (Re)habilitation/Intervention

- Evaluating and modifying audiologic (re)habilitation, including therapy schedule, discharge criteria, frequency, duration, and type of service

- Teaching communication strategies to clients and their significant others; e.g.,
 - speech reading
 - conversational repair strategies
- Facilitating communication development and/or auditory learning (listening, speech, expressive, and receptive language)
- Providing support for school-age children; e.g.,
 - counseling
 - addressing the acoustic environment
 - consulting with educational personnel
 - providing direct therapy

Tinnitus Management

- Counseling and sound management intervention (e.g., environmental sound sources, ear level sound generators) and follow-up

Vestibular Rehabilitation

- Treatment for benign paroxysmal positional vertigo (BPPV)

Counseling

- Counseling related to device use and safety
- Counseling children's caregivers about hearing loss, communication development, and modes of communication
- Providing individual, family, and group counseling related to hearing loss and subsequent communication and areas of psychosocial, behavioral, vocational, and educational adjustment
- Making referrals, as appropriate, to other audiologists and related professionals

Documentation and Communication

- Documentation of intervention processes and results
- Generating recommendations resulting from intervention processes
- Communication of recommendations to relevant individuals (e.g., clients, caregivers, physicians, agencies) to coordinate a plan of action
- Interacting effectively with clients, families, other appropriate individuals, and professionals including working with interpreters (ASL and other languages, sign systems) to effectively communicate with clients about treatment

V. Professional Issues (10%)

Professional Practice

- Different service delivery models in health care and school-based settings
- Management and business practices; e.g.,
 - coding and reimbursement
 - case management
- Effective and appropriate communication of results, recommendations, and intervention status
 - selecting the means of communication; e.g., formal reports, notes, emails, phone calls
 - using language appropriate for the recipient
 - maintaining client/patient privacy
- Equipment calibration and maintenance to standards and manufacturer’s specifications

Legal and Ethical Practice and Advocacy

- Standards for professional conduct
- Protection of clients’/patients’ rights
- Legislative and regulatory mandates
- Advocacy for appropriate services
 - underserved populations
 - inclusion of services in individualized education programs (IEPs)
 - insurance appeals

Evidence-Based Practice

- Application of research findings to maintain currency in care
- Research principles and practices; e.g., experimental design, statistical methods, and application to clinical populations

5. Determine Your Strategy for Success

Set clear goals and deadlines so your test preparation is focused and efficient

Effective *Praxis* test preparation doesn't just happen. You'll want to set clear goals and deadlines for yourself along the way. Otherwise, you may not feel ready and confident on test day.

1) Learn what the test covers.

You may have heard that there are several different versions of the same test. It's true. You may take one version of the test and your friend may take a different version a few months later. Each test has different questions covering the same subject area, but both versions of the test measure the same skills and content knowledge.

You'll find specific information on the test you're taking in the Test at a Glance section, which outlines the content categories that the test measures and what percentage of the test covers each topic.

Visit www.ets.org/praxis/testprep for information on other *Praxis* tests.

2) Assess how well you know the content.

Research shows that test takers tend to overestimate their preparedness—this is why some test takers assume they did well and then find out they did not pass.

The *Praxis* tests are demanding enough to require serious review of likely content, and the longer you've been away from the content the more preparation you will most likely need. If it has been longer than a few months since you've studied your content area, make a concerted effort to prepare.

3) Collect study materials.

Gathering and organizing your materials for review are critical steps in preparing for the *Praxis* tests. Consider the following reference sources as you plan your study:

- Did you take a course in which the content area was covered? If yes, do you still have your books or your notes?
- Does your college library have a good introductory college-level textbook in this area?
- Does your local library have a high school-level textbook?

Study guides are available for purchase for many *Praxis* tests at www.ets.org/praxis/testprep. Each guide provides a combination of test preparation and practice, including sample questions and answers with explanations.

4) Plan and organize your time.

You can begin to plan and organize your time while you are still collecting materials. Allow yourself plenty of review time to avoid cramming new material at the end. Here are a few tips:

- Choose a test date far enough in the future to leave you plenty of preparation time at www.ets.org/praxis/register/centers_dates.
- Work backward from that date to figure out how much time you will need for review.
- Set a realistic schedule—and stick to it.

5) Practice explaining the key concepts.

Praxis tests with constructed-response questions assess your ability to explain material effectively. As a teacher, you'll need to be able to explain concepts and processes to students in a clear, understandable way. What are the major concepts you will be required to teach? Can you explain them in your own words accurately, completely, and clearly? Practice explaining these concepts to test your ability to effectively explain what you know.

6) Understand how questions will be scored.

Scoring information can be found in the Learn About Your Test section on page 11.

7) Develop a study plan.

A study plan provides a roadmap to prepare for the *Praxis* tests. It can help you understand what skills and knowledge are covered on the test and where to focus your attention. Use the study plan template on page 19 to organize your efforts.

And most important—get started!

Would a Study Group Work for You?

Using this guide as part of a study group

People who have a lot of studying to do sometimes find it helpful to form a study group with others who are working toward the same goal. Study groups give members opportunities to ask questions and get detailed answers. In a group, some members usually have a better understanding of certain topics, while others in the group may be better at other topics. As members take turns explaining concepts to each other, everyone builds self-confidence.

If the group encounters a question that none of the members can answer well, the group can go to a teacher or other expert and get answers efficiently. Because study groups schedule regular meetings, members study in a more disciplined fashion. They also gain emotional support. The group should be large enough so that multiple people can contribute different kinds of knowledge, but small enough so that it stays focused. Often, three to six members is a good size.

Here are some ways to use this guide as part of a study group:

- **Plan the group's study program.** Parts of the study plan template on page 19 can help to structure your group's study program. By filling out the first five columns and sharing the worksheets, everyone will learn more about your group's mix of abilities and about the resources, such as textbooks, that members can share with the group. In the sixth column ("Dates planned for study of content"), you can create an overall schedule for your group's study program.
- **Plan individual group sessions.** At the end of each session, the group should decide what specific topics will be covered at the next meeting and who will present each topic. Use the topic headings and subheadings in the Test at a Glance on page 12 to select topics and then select practice questions, beginning on page 25.
- **Prepare your presentation for the group.** When it's your turn to present, prepare something that is more than a lecture. Write two or three original questions to pose to the group. Practicing writing actual questions can help you better understand the topics covered on the test as well as the types of questions you will encounter on the test. It will also give other members of the group extra practice at answering questions.

- **Take the practice test together.** The idea of the practice test is to simulate an actual administration of the test, so scheduling a test session with the group will add to the realism and may also help boost everyone's confidence. Remember, complete the practice test using only the time that will be allotted for that test on your administration day.
- **Learn from the results of the practice test.** Score each other's answer sheets. For the constructed-response questions, look at the Sample Test Questions, which also contain sample responses to those questions and shows how they were scored. Then try to follow the same guidelines that the test scorers use.
- **Be as critical as you can.** You're not doing your study partner(s) any favors by letting them get away with an answer that does not cover all parts of the question adequately.
- **Be specific.** Write comments that are as detailed as the comments about the sample responses. Indicate where and how your study partner(s) are doing an inadequate job of answering the question. Writing notes in the margins of the answer sheet may also help.
- **Be supportive.** Include comments that point out what your study partner(s) got right and therefore earned points.

Then plan one or more study sessions based on aspects of the questions on which group members performed poorly. For example, each group member might be responsible for rewriting one paragraph of a response in which someone else did an inadequate job.

Whether you decide to study alone or with a group, remember that the best way to prepare is to have an organized plan. The plan should set goals based on specific topics and skills that you need to learn, and it should commit you to a realistic set of deadlines for meeting these goals. Then you need to discipline yourself to stick with your plan and accomplish your goals on schedule.

6. Develop Your Study Plan

Develop a personalized study plan and schedule

Planning your study time is important because it will help ensure that you review all content areas covered on the test. Use the sample study plan below as a guide. It shows a plan for the *Praxis I® Pre-Professional Skills Test: Reading* test. Following that is a study plan template that you can fill out to create your own plan. Use the Test at a Glance and Topics Covered information beginning on page 11 to help complete it.

Use this worksheet to:

- 1. Define Content Areas:** List the most important content areas for your test as defined in the Test at a Glance and Topics Covered sections.
- 2. Determine Strengths and Weaknesses:** Identify your strengths and weaknesses in each content area.
- 3. Identify Resources:** Identify the books, courses, and other resources you plan to use for each content area.
- 4. Study:** Create and commit to a schedule that provides for regular study periods.

Praxis Test Name: Praxis I Pre-Professional Skills Test: Reading
Praxis Test Code(s): 0710
Test Date: 11/15/12

Content covered	Description of content	How well do I know the content? (scale 1–5)	What resources do I have/need for this content?	Where can I find the resources I need?	Dates I will study this content	Date completed
Literal Comprehension						
Main Ideas	Identify summaries or paraphrases of main idea or primary purpose of reading selection	2	Middle school English text book	College library, middle school teacher	9/15/12	9/15/12
Supporting Ideas	Identify summaries or paraphrases of supporting ideas and specific details in reading selection	2	Middle school English text book	College library, middle school teacher	9/17/12	9/17/12
Organization	Identify how reading selection is organized in terms of cause/effect and compare/contrast	3	Middle and high school English text book	College library, middle and high school teachers	9/20/12	9/21/12
Organization	Identify key transition words/phrases in reading selection and how used	4	Middle and high school English text book	College library, middle and high school teachers	9/25/12	9/26/12
Vocabulary in Context	Identify meanings of words as used in context of reading selection	3	Middle and high school English text book, dictionary	College library, middle and high school teachers	9/25/12	9/27/12

(continued on next page)

Content covered	Description of content	How well do I know the content? (scale 1–5)	What resources do I have/need for this content?	Where can I find the resources I need?	Dates I will study this content	Date completed
Critical and Inferential Comprehension						
Evaluation	Determine whether evidence strengthens, weakens, or is relevant to arguments in reading selection	5	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/1/12	10/1/12
Evaluation	Determine role that an idea, reference, or piece of information plays in author's discussion/argument	5	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/1/12	10/1/12
Evaluation	Determine if information presented is fact or opinion	4	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/1/12	10/1/12
Evaluation	Identify relationship among ideas presented in reading selection	2	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/1/12	10/1/12
Inferential Reasoning	Draw inferences/implications from directly stated content of reading selection	3	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/8/12	10/8/12
Inferential Reasoning	Determine logical assumptions on which argument or conclusion is based	2	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/8/12	10/8/12
Inferential Reasoning	Determine author's attitude toward materials discussed in reading selection	1	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/15/12	10/17/12
Generalization	Recognize or predict ideas/situations that are extensions of, or similar to, what has been presented in reading selection	2	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/22/12	10/24/12
Generalization	Draw conclusions from materials presented in reading selection	3	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/24/12	10/24/12
Generalization	Apply ideas presented in a reading selection to other situations	3	High school text book, college course notes	College library, course notes, high school teacher, college professor	10/27/12	10/27/12

My Study Plan

Use this worksheet to:

1. **Define Content Areas:** List the most important content areas for your test as defined in the Test at a Glance and Topics Covered sections.
2. **Determine Strengths and Weaknesses:** Identify your strengths and weaknesses in each content area.
3. **Identify Resources:** Identify the books, courses, and other resources you plan to use for each content area.
4. **Study:** Create and commit to a schedule that provides for regular study periods.

Praxis Test Name: _____
Praxis Test Code: _____
Test Date: _____

Content covered	Description of content	How well do I know the content? (scale 1–5)	What resources do I have/need for this content?	Where can I find the resources I need?	Dates I will study this content	Date completed

(continued on next page)

7. Review Smart Tips for Success

Follow test-taking tips developed by experts

Learn from the experts. Take advantage of these answers to questions you may have and practical tips to help you navigate the *Praxis* test and make the best use of your time.

Should I Guess?

Yes. Your score is based on the number of questions you answer correctly, with no penalty or subtraction for an incorrect answer. When you don't know the answer to a question, try to eliminate any obviously wrong answers and then guess at the correct one. Try to pace yourself so that you have enough time to carefully consider every question.

Can I answer the questions in any order?

Yes. You can go through the questions from beginning to end, as many test takers do, or you can create your own path. Perhaps you will want to answer questions in your strongest area of knowledge first and then move from your strengths to your weaker areas. On computer-delivered tests, you can use the "Skip" function to skip a question and come back to it later. There is no right or wrong way. Use the approach that works best for you.

Are there trick questions on the test?

No. There are no hidden meanings or trick wording. All of the questions on the test ask about subject matter knowledge in a straightforward manner.

Are there answer patterns on the test?

No. You might have heard this myth: the answers on multiple-choice tests follow patterns. Another myth is that there will never be more than two questions with the same lettered answer following each other. Neither myth is true. Select the answer you think is correct based on your knowledge of the subject.

Can I write in the test booklet or, for a computer-delivered test, on the scratch paper I am given?

Yes. You can work out problems right on the pages of the booklet or scratch paper, make notes to yourself, mark questions you want to review later or write anything at all. Your test booklet or scratch paper will be destroyed after you are finished with it, so use it in any way that is helpful to you. But make sure to mark your answers on the answer sheet or enter them on the computer.

Smart Tips for Taking the Test

1. **For a paper-delivered test, put your answers in the right "bubbles."** It seems obvious, but be sure that you fill in the answer "bubble" that corresponds to the question you are answering. A significant number of test takers fill in a bubble without checking to see that the number matches the question they are answering.
2. **Skip the questions you find extremely difficult.** Rather than trying to answer these on your first pass through the test, leave them blank and mark them in your test booklet. Pay attention to the time as you answer the rest of the questions on the test, and try to finish with 10 or 15 minutes remaining so that you

can go back over the questions you left blank. Even if you don't know the answer the second time you read the questions, see if you can narrow down the possible answers, and then guess.

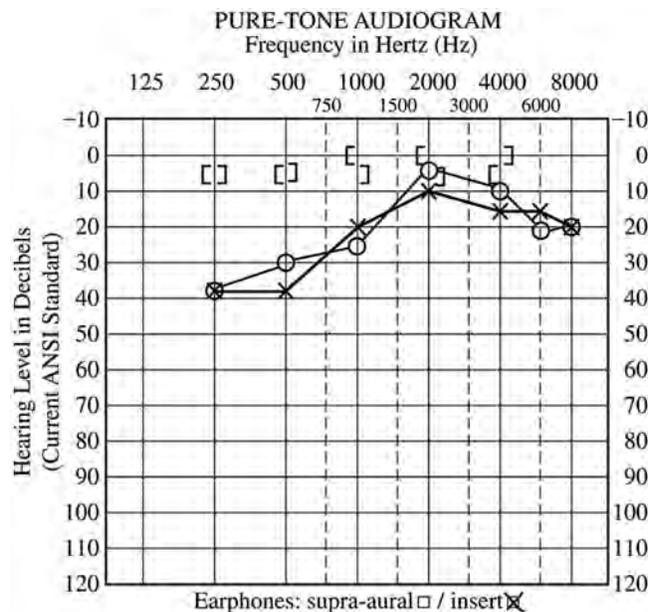
- 3. Keep track of the time.** Bring a watch to the test, just in case the clock in the test room is difficult for you to see. Keep the watch as simple as possible—alarms and other functions may distract others or may violate test security. If the test center supervisor suspects there could be an issue with your watch, they will ask you to remove it, so simpler is better! You will probably have plenty of time to answer all of the questions, but if you find yourself becoming bogged down in one section, you might decide to move on and come back to that section later.
- 4. Read all of the possible answers before selecting one.** Then reread the question to be sure the answer you have selected really answers the question. Remember, a question that contains a phrase such as “Which of the following does NOT ...” is asking for the one answer that is NOT a correct statement or conclusion.
- 5. Check your answers.** If you have extra time left over at the end of the test, look over each question and make sure that you have answered it as you intended. Many test takers make careless mistakes that they could have corrected if they had checked their answers.
- 6. Don't worry about your score when you are taking the test.** No one is expected to answer all of the questions correctly. Your score on this test is not analogous to your score on the *GRE*[®] or other similar-looking (but in fact very different) tests. It doesn't matter on the *Praxis* tests whether you score very high or barely pass. If you meet the minimum passing scores for your state and you meet the state's other requirements for obtaining a teaching license, you will receive a license. In other words, what matters is meeting the minimum passing score. You can find passing scores for all states that use *The Praxis Series* tests at http://www.ets.org/s/praxis/pdf/passing_scores.pdf or on the website of the state for which you are seeking certification/licensure.
- 7. Use your energy to take the test, not to get angry at it.** Getting angry at the test only increases stress and decreases the likelihood that you will do your best. Highly qualified educators and test development professionals, all with backgrounds in teaching, worked diligently to make the test a fair and valid measure of your knowledge and skills. Your state painstakingly reviewed the test before adopting it as a licensure requirement. The best thing to do is concentrate on answering the questions.

8. Practice with Sample Test Questions

Answer practice questions and find explanations for correct answers

Sample Test Questions

The sample questions that follow illustrate the kinds of questions on the test. They are not, however, representative of the entire scope of the test in either content or difficulty. Answers with explanations follow the questions.



KEY:

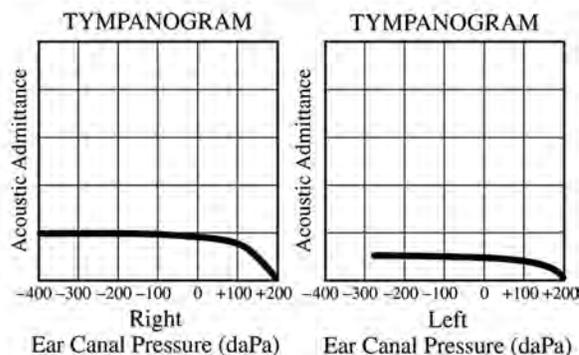
Right	Stimulus	Left
○	Air	×
<	Bone	>
△	Masked Air	□
[Masked Bone]
∨	No Response	∇
Sound Field: S		

SPEECH AUDIOMETRY

	PTA (dB HL)	SRT SAI (dB HL)	Word / Sentence Recognition	Word / Sentence Recognition	MCL (dB HL)	UCL (dB HL)
Right	20	15	%	%		
Left	22	15	%	%		
MLV Recorded		TEST MATERIAL:				

TYMPANOMETRY
226 678 / 1000 Hz (circle one)

	Right	Left
Peak-Compensated Static Admittance (mmho)	∅	∅
Tympanometric Peak Pressure (daPa)	no peak	no peak
Tympanometric Width (daPa)	0.48	0.4
Equivalent Ear Canal Volume (cm ³)	N/A	N/A



ACOUSTIC REFLEX

	Stimulus Right	500	1K	2K
IPSI	Threshold (dB HL)	Absent	→	→
	Decay (pos/neg)			
CONTRA	Threshold (dB HL)	Absent	→	→
	Decay (pos/neg)			

ACOUSTIC REFLEX

	Stimulus Left	500	1K	2K
IPSI	Threshold (dB HL)	Absent	→	→
	Decay (pos/neg)			
CONTRA	Threshold (dB HL)	Absent	→	→
	Decay (pos/neg)			

Directions: Each of the questions or incomplete statements that follow are followed by five suggested answers or completions. Select the one that is best in each case.

Questions 1–4 are based on the following case.

Kim is a six-year-old girl whose parents brought her to the audiology clinic because she has been having academic trouble in school. According to her classroom teacher, Kim has difficulty following directions. She appears to stare blankly when the teacher is speaking to the class and never answers questions. Kim reportedly has had three sinus infections in the past eight months that have been treated by her pediatrician. She is scheduled to see an allergist next month. Audiometric data for Kim is shown on the data sheet on page 25.

1. Based on the audiometric and case history information provided here, which of the following is the most likely etiology for Kim's hearing loss?
 - (A) Otosclerosis
 - (B) Chronic otitis media
 - (C) Bilateral atresia
 - (D) Impacted cerumen
 - (E) Perforated tympanic membrane

2. Which of the following scores are mostly likely to be obtained if word recognition is assessed using an age appropriate test at 40 dB SL?
 - (A) 70% right ear, 66% left ear
 - (B) 60% right ear, 80% left ear
 - (C) 80% right ear, 72% left ear
 - (D) 88% right ear, 90% left ear
 - (E) 100% right ear, 70% left ear

3. To accommodate Kim's needs, the audiologist would most appropriately recommend which of the following?
 - (A) Binaural bone-anchored hearing aids
 - (B) A mild gain hearing aid for use in the classroom
 - (C) Individual tutoring outside the classroom for three hours/day
 - (D) Referral to an otolaryngologist for a cochlear implant evaluation
 - (E) Preferential classroom seating and regular monitoring of middle ear status

4. According to IDEA, the audiologist's recommendations for this child should be addressed in which of the following documents?
 - (A) Individualized Family Service Plan
 - (B) Individualized Education Program
 - (C) Report Card
 - (D) Behavioral Intervention Plan
 - (E) Cumulative academic record

5. A six-month-old child born with bilateral bony atresia is seen for an audiological evaluation and treatment recommendation. Radiological evidence indicates the probable presence of an intact middle ear and cochlea. ABR responses have been obtained at near-normal levels to bone-conducted signals. Of the following, the most appropriate course of action for this child at this time would be to
- (A) defer treatment until growth of the external and middle ear is complete at about age six
 - (B) suggest that surgery be initiated on at least one ear to permit a normal air-conducted pathway
 - (C) recommend an implanted bone-anchored hearing aid
 - (D) investigate the use of a bone-conduction hearing aid until audiological test results can be confirmed and surgery initiated when the child is older
 - (E) counsel the parents concerning sign language and initiate a treatment program based on the use of all visual cues
6. Which of the following statements about a caloric response yielding a left unilateral weakness in the interpretation of videonystagmography results is most accurate?
- (A) It suggests a right peripheral vestibular disorder of the labyrinth
 - (B) It is of no real value in the interpretation
 - (C) It suggests a nonspecific (nonlocalizing) vestibular disorder
 - (D) It suggests a left peripheral vestibular disorder of either the labyrinthine or the VIIIth nerve
 - (E) It suggests a central vestibular disorder
7. The accuracy of a hearing screening test in correctly identifying those individuals who actually have a hearing disorder is referred to as the screening test's
- (A) reliability
 - (B) validity
 - (C) precision
 - (D) specificity
 - (E) sensitivity
8. Carol is a 34-year-old woman with a sudden-onset, left-sided facial paralysis that has been diagnosed as Bell's palsy. Acoustic reflexes are present at normal levels bilaterally for both ipsilateral and contralateral stimulation. Which of the following statements accurately applies to this situation?
- (A) The pathology is proximal to the stapedial branch of the VIIth nerve
 - (B) The pathology is distal to the stapedial branch of the VIIth nerve
 - (C) The patient has a left acoustic neuroma
 - (D) The facial paralysis is probably nonorganic in nature
 - (E) No reliable statement can be made about VIIth nerve function, since the responses could be due to Vth nerve activity
9. Of the following, the most likely adult candidate for a cochlear implant is one with a
- (A) bilateral hearing loss due to chronic otitis media
 - (B) bilateral hearing loss due to noise exposure
 - (C) bilateral hearing loss due to adult meningitis
 - (D) unilateral hearing loss of sudden onset and unknown etiology
 - (E) unilateral hearing loss secondary to surgery for vestibular schwannoma

10. According to PL 99-457, a child under 2 years of age who has a hearing impairment must
- be fitted with binaural hearing aids
 - have biannual hearing evaluations
 - be enrolled in a center-based habilitation program
 - have a written individualized family service plan
 - be provided with total communication training
11. Which of the following is typically the best choice of amplification for a person with bilateral moderate conductive hearing loss and chronic drainage from both ears?
- Behind-the-ear aids with vented earmolds
 - A body-worn hearing aid
 - A vibrotactile aid
 - A bone-conduction hearing aid
 - A multichannel cochlear implant
12. In the measurement of real-ear sound-pressure levels with a probe-tube microphone system, insufficient probe-tube depth will tend to
- increase the high-frequency response
 - decrease the high-frequency response
 - decrease the response at all frequencies
 - decrease the low-frequency response
 - increase the low-frequency response
13. The measurement of distortion product otoacoustic emission (DPOAE) involves the presentation of pairs of pure tones to the patient's ear. Which auditory response does this test measure?
- Cubic difference tone
 - Summation tone
 - First and second harmonics
 - Resonance in outer hair cells
 - Resonance in inner hair cells
14. A client with a history of bilateral profound sensorineural hearing loss, lack of vestibular function, and progressive retinal deterioration is scheduled for an audiological assessment. Which etiology is consistent with the client's history?
- Auditory neuropathy
 - Vestibular schwannomas
 - Neurofibromatosis
 - Usher's syndrome
 - Meningitis
15. The area of the ear canal where most cerumen is generated is
- at the isthmus
 - at the eardrum
 - the bony portion
 - the middle third of the canal
 - the outer third of the canal
16. A child comes to the clinic due to problems understanding the teacher at school. The child has a moderate hearing loss and wears bilateral hearing aids. Aided speech-recognition scores at 55 dB HL in quiet were 88 percent correct, with scores being 60 percent correct with a +5 SNR. Which of the following would be the best recommendation for the child?
- Increase the gain of the hearing aid
 - Utilize directional microphones with the hearing aids
 - Utilize a personal frequency modulation (FM) system with the hearing aids
 - Utilize a low-gain frequency modulation (FM) system with headphones
 - Refer for a cochlear implant evaluation

17. Known types of presbycusis can be attributed to each of the following EXCEPT
- (A) degeneration of sensory hair cells
 - (B) degeneration of auditory neurons
 - (C) degeneration of the stria vascularis
 - (D) degeneration of the ossicular joint
 - (E) structural changes in the basilar membrane
18. Which of the following best identifies the appropriate tools to screen for newborn hearing loss in accordance with the Joint Committee on Infant Hearing guidelines?
- | In the
well-baby
nursery | In the
neonatal
<u>intensive care unit</u> |
|--------------------------------|--|
| (A) ABR | OAE |
| (B) OAE | OAE and ABR |
| (C) OAE and ABR | ABR |
| (D) OAE, ABR, and ASSR | OAE and ABR |
| (E) ABR | ABR and ASSR |
19. In 2002, the American National Standards Institute (ANSI) adopted guidelines for classroom acoustics, intended for use in the design of new classrooms and in the renovation of existing classrooms. The ANSI-recommended average noise levels and reverberation times for unoccupied classrooms (< 10,000 cubic feet) are
- (A) 15 dBA or less and 0.2 seconds or less
 - (B) 25 dBA or less and 2.0 seconds or less
 - (C) 35 dBA or less and 0.6 seconds or less
 - (D) 45 dBA or less and 2.0 seconds or less
 - (E) 55 dBA or less and 0.2 seconds or less

Answers to Sample Questions

1. The correct answer is (B). According to the case history provided, the patient is a 6-year-old child who has experienced recurrent sinus infections and likely has allergies. Together with the audiometric data that reveal a bilateral hearing loss with air-bone gaps, flat tympanograms, and absent acoustic reflexes suggest a conductive hearing loss. The flat tympanograms rule out the possibility of otosclerosis. The degree of hearing loss and the fact that tympanograms were obtained indicate that atresia is not present. The degree of hearing loss cannot be accounted for by impacted cerumen. The equivalent ear canal volume is too small to be associated with eardrum perforation. Thus, the only answer that fits with all of the audiometric results and the history is chronic otitis media (B).

2. The correct answer is (D). The pure-tone air and bone conduction thresholds together with the immittance results indicate that this 6-year-old child has a purely conductive, bilateral hearing loss. Thus, it is expected that once speech is clearly audible to the child, word recognition ability will be good to excellent bilaterally. The only reasonable choice of word recognition scores is therefore 88% right ear, 90% left ear (D). All of the other choices include scores that are much too poor, either unilaterally or bilaterally.

3. The correct answer is (E). Because the history and audiometric results indicate bilateral otitis media, which can be treated medically, a bone-anchored hearing aid is not a reasonable choice for remediation. Likewise, a mild-gain hearing aid for classroom use is not warranted unless it is determined that medical treatment does not improve auditory acuity. While tutoring may be beneficial if the child is having a problem with a specific subject, Kim should remain in the classroom for as much of the school day as possible. Thus, taking her out of class for three hours a day is not feasible. Providing her with preferential seating and monitoring her middle-ear status is clearly the most appropriate remediation strategy for the educational audiologist to recommend for Kim.

4. The correct answer is (B). All children with documented hearing loss must be followed by the school, and the specific recommendations for each child must be described in an Individualized Education Program. An Individualized Family Service Plan, (A), is required for children 0 to 3 years

of age. Under IDEA, report cards are not required to indicate an audiologist's recommendations. The case study does not indicate that Kim has behavioral problems, so a behavioral intervention plan is not correct. A child's cumulative record does not reflect any related service recommendation.

5. The correct answer is (D). The evaluation shows that the middle ear and the cochlea are probably intact and that a surgeon has only to open the occluded canals for hearing to be made functional. However, to perform surgery on a six-month-old child without having more information about hearing competence would be unwarranted. Because bilateral atresia often can be handled through a bone-conduction hearing aid, such a device should be tried first and the child's growth and development monitored to determine when surgery should take place.

6. The correct answer is (D). A unilateral weakness indicates a disorder of the labyrinth or the VIIIth nerve on the same side as the weakness. Thus, in this case the disorder is indicated on the left, not the right, side: (D) is the correct answer and (A) is incorrect. The finding is of great value, since it has determined that a unilateral peripheral problem exists, so (B) is incorrect. (C) is incorrect because the disorder is localized to the periphery. (E) is incorrect because a central disorder is ruled out by these results.

7. The correct answer is (E). The question gives a definition of test sensitivity. (A) is incorrect because not all sensitive tests have reliability (the ability of the test to show consistent results for the same subject under different conditions). Validity is the ability of a test to measure what it is designed to measure; a test can be sensitive without being valid if there are too many false-positives, so (B) is incorrect. (C) is incorrect because a test can correctly identify individuals with hearing disorders without identifying the subjects' precise thresholds. Specificity refers to how accurately the test identifies those individuals who do not have a hearing loss, so (D) is incorrect.

8. The correct answer is (B). The acoustic reflex measurement helps to determine the site of lesion of facial nerve disorder as either distal or proximal to the stapedial branch of the VIIth nerve. If the acoustic reflex is present at normal HTLs, the localization of pathology is likely distal to the stapedius branch of the nerve.

9. The correct answer is (C). Cochlear implants are typically recommended for individuals with profound or severe-to-profound bilateral sensorineural hearing losses; adult meningitis is likely to cause such hearing loss. (A) and (B) are incorrect because individuals with hearing losses due to noise exposure or chronic otitis media are likely to benefit from amplification; hearing losses with those etiologies tend to be less than profound. Unilateral hearing losses generally do not require intervention as drastic as a cochlear implant, so (D) and (E) are incorrect. Furthermore, (E) is incorrect because successful use of a cochlear implant requires an intact auditory nerve (VIIIth nerve) and surgery for vestibular schwannoma usually destroys this nerve.

10. The correct answer is (D). P.L. 99-457 specifies that a plan be developed, but does not specify the type of services to be delivered. All other answer choices specify particular types of services.

11. The correct answer is (D). A bone-conduction hearing aid can boost the bone-conduction signal and provide enough amplification to be helpful to clients with moderate hearing loss, and the hearing aid will not interfere with the drainage of the ear. Hearing aids with earmolds are unsuitable for clients with chronic drainage because the drainage would damage the earmold and the additional blockage of the external canal would exacerbate the drainage problem and increase the likelihood of infection; thus (A) is incorrect. Body-worn hearing aids are coupled to earmolds and may provide more power than is necessary for people with only moderate hearing loss, so (B) is incorrect. Vibrotactile aids and cochlear implants are useful only for clients with profound hearing losses who cannot benefit from amplification, so (C) and (E) are incorrect.

12. The correct answer is (B). Probe tubes for measuring real-ear sound-pressure levels (SPL) should be inserted as close to the tympanic membrane as possible, since it is the SPL at the tympanic membrane that is being measured. If the probe tube is too far from the tympanic membrane, high-frequency sound waves bounced off the eardrum will dissipate before reaching the probe, but low-frequency sound waves, which do not dissipate as easily, will be essentially unaffected. The overall effect will thus be a decrease only in the high-frequency response.

13. The correct answer is (A). As noted in the question, a pair of tones is presented via an earphone in the measurement of DPOAEs. Because the normal auditory system is nonlinear, when two primary tones are introduced into the ear, distortion products are produced. The largest distortion product, and the one recorded in the evaluation of DPOAEs, is the cubic difference tone. A summation tone may occur and harmonics may occur, but they will be very small, definitely not large enough to be measured. Hair cells do not resonate, so the other answers are not possible.

14. The correct answer is (D). Approximately 40 percent of patients with Usher's syndrome show a profound hearing loss with vestibular dysfunction and an early onset of retinitis pigmentosa (RP), a progressive degeneration of the retina that leads to loss of night vision, restriction of visual fields, and, ultimately, blindness. (A), (B), (C), and (E) are incorrect because the etiologies are not associated with progressive visual deterioration.

15. The correct answer is (E). Cerumen is created by a combination of secretions of sweat glands and sebum glands, which are located in the cartilaginous outer third of the ear canal.

16. The correct answer is (C). Using an FM system provides the most benefit in improving signal-to-noise ratio, so (C) would be the most appropriate recommendation for a child who has difficulty understanding speech in noise. As such, (A) and (B) would not be the most appropriate answer. A low-gain FM system would not be appropriate considering the moderate hearing loss and the use of hearing aids. Since the child does not have a severe-to-profound hearing loss, (E) would not be an appropriate answer because cochlear implants are for patients with severe-to-profound hearing loss.

17. The correct answer is (D). The ossicular joint is not involved in presbycusis. (A), (B), (C), and (E) are the causes of four identified types of presbycusis: (A) causes sensory presbycusis, (B) causes neural presbycusis, (C) causes strial presbycusis, and (E) causes cochlear conductive presbycusis.

18. The correct answer is (C). The guidelines clearly indicate that ABR is the screening tool to be used in the neonatal intensive care unit (NICU). For an infant in the well-baby nursery, OAE can be used for screening, but ABR could also be used. (D) and (E) are incorrect because ASSR is not a recommended screening tool. (A) and (B) are incorrect because OAE is not recommended for use in the NICU.

19. The correct answer is (C) because it captures the recommendations for any core learning space with an enclosed volume below 10,000 cubic feet. By the ANSI guidelines, the classroom acoustics indicated by (D) and (E) would exceed the recommended noise levels for an unoccupied classroom, while the noise levels indicated by (A) and (B) are stricter than the recommendations, which were designed for practical application in school settings. The acoustics indicated by (B) and (D) would allow reverberation times that exceed the recommendations for classrooms.

9. Check on Testing Accommodations

See if you qualify for accommodations that may make it easier to take the Praxis test

What if English is not my primary language?

Praxis tests are given only in English. If your primary language is not English (PLNE), you may be eligible for extended testing time. For more details, visit www.ets.org/praxis/register/accommodations/plne.

What if I cannot take the paper-based test on Saturday?

Monday is the alternate paper-delivered test day for test takers who can't test on Saturday due to:

- religious convictions
- duties as a member of the U.S. Armed Forces

Online registration is not available for Monday test takers. You must complete a registration form and provide a photocopy of your military orders or a letter from your cleric. You'll find details at www.ets.org/praxis/register/accommodations/monday_testing.

What if I have a disability or other health-related need?

The following accommodations are available for *Praxis* test takers who meet the Americans with Disabilities Act (ADA) Amendments Act disability requirements:

- Extended testing time
- Additional rest breaks
- Separate testing room
- Writer/recorder of answers
- Test reader
- Sign language interpreter for spoken directions only
- Perkins Braille
- Braille slate and stylus
- Printed copy of spoken directions
- Oral interpreter
- Audio test
- Braille test
- Large print test book (14 pt.)
- Large print answer sheet
- Listening section omitted

For more information on these accommodations, visit www.ets.org/praxis/register/disabilities.

Note: Test takers who have health-related needs requiring them to bring equipment, beverages, or snacks into the testing room or to take extra or extended breaks must request these accommodations by following the procedures described in the *Bulletin Supplement for Test Takers with Disabilities or Health-related Needs* (PDF), which can be found at <http://www.ets.org/praxis/register/disabilities>.

You can find additional information on available resources for test takers with disabilities or health-related needs at www.ets.org/disabilities.

10. Do Your Best on Test Day

Get ready for test day so you will be calm and confident

You followed your study plan. You are prepared for the test. Now it's time to prepare for test day.

Plan to end your review a day or two before the actual test date so you avoid cramming. Take a dry run to the test center so you're sure of the route, traffic conditions and parking. Most of all, you want to eliminate any unexpected factors that could distract you from your ultimate goal—passing the *Praxis* test!

On the day of the test, you should:

- be well rested
- wear comfortable clothes and dress in layers
- eat before you take the test and bring food with you to eat during break to keep your energy level up
- bring an acceptable and valid photo identification with you
- bring a supply of well-sharpened No. 2 pencils (at least 3) and a blue or black pen for the essay or constructed-response tests
- be prepared to stand in line to check in or to wait while other test takers check in
- select a seat away from doors, aisles, and other high-traffic areas

You can't control the testing situation, but you can control yourself. Stay calm. The supervisors are well trained and make every effort to provide uniform testing conditions, but don't let it bother you if the test doesn't start exactly on time. You will have the necessary amount of time once it does start.

You can think of preparing for this test as training for an athletic event. Once you've trained, prepared, and rested, give it everything you've got.

What items am I restricted from bringing into the test center?

You cannot bring into the test center personal items such as:

- handbags, knapsacks, or briefcases
- water bottles or canned or bottled beverages
- study materials, books, or notes
- scrap paper
- any electronic, photographic, recording, or listening devices

Note: All cell phones, smartphones (e.g., BlackBerry® devices, iPhones, etc.), PDAs, and other electronic, photographic, recording, or listening devices are strictly prohibited from the test center. If you are seen with such a device, you will be dismissed from the test, your test scores will be canceled, and you will forfeit your test fees. If you are seen USING such a device, the device will be confiscated and inspected. For more information on what you can bring to the test center, visit www.ets.org/praxis/test_day/bring.

Are You Ready?

Complete this checklist to determine if you're ready to take your test.

- Do you know the testing requirements for the license or certification you are seeking in the state(s) where you plan to teach?
- Have you followed all of the test registration procedures?
- Do you know the topics that will be covered in each test you plan to take?
- Have you reviewed any textbooks, class notes, and course readings that relate to the topics covered?
- Do you know how long the test will take and the number of questions it contains?
- Have you considered how you will pace your work?
- Are you familiar with the types of questions for your test?
- Are you familiar with the recommended test-taking strategies?
- Have you practiced by working through the practice questions in this Study Companion or in a Study Guide or Practice Test?
- If constructed-response questions are part of your test, do you understand the scoring criteria for these items?
- If you are repeating a *Praxis* test, have you analyzed your previous score report to determine areas where additional study and test preparation could be useful?

If you answered “yes” to the questions above, your preparation has paid off. Now take the *Praxis* test, do your best, pass it—and begin your teaching career!

Appendix: Other Questions You May Have

Here is some supplemental information that can give you a better understanding of the *Praxis* tests.

What do the *Praxis* tests measure?

The *Praxis* tests measure the specific pedagogical skills and knowledge that beginning teachers need. The tests do not measure an individual's disposition toward teaching or potential for success. The assessments are designed to be comprehensive and inclusive, but are limited to what can be covered in a finite number of questions and question types.

What are the *Praxis I* tests?

The *Praxis I* tests measure basic skills in reading, writing, and mathematics. All these tests include multiple-choice questions and the Writing test also includes an essay question. *Praxis I* tests are designed to evaluate whether you have the academic skills needed to prepare for a career in education.

What are the *Praxis II* tests?

Praxis II Subject Assessments measure knowledge of specific subjects that K–12 educators teach, as well as general and subject-specific teaching skills and knowledge. Ranging from Agriculture to World Languages, there are more than 130 *Praxis II* tests, which contain multiple-choice or constructed-response questions, or a combination of both.

What is the difference between *Praxis* multiple-choice and constructed-response tests?

Multiple-choice tests measure a broad range of knowledge across your content area. Constructed-response tests measure your ability to provide in-depth explanations of a few essential topics in a given subject area. Content-specific *Praxis II* pedagogy tests, most of which are constructed-response, measure your understanding of how to teach certain fundamental concepts in a subject area.

The tests do not measure your actual teaching ability, however. Teaching combines many complex skills that are typically measured in other ways, including classroom observation, videotaped practice, or portfolios not included in the *Praxis* test.

Who takes the tests and why?

Some colleges and universities use the *Praxis I* tests to evaluate individuals for entry into teacher education programs. The assessments are generally taken early in your college career. Many states also require *Praxis I* scores as part of their teacher licensing process.

Individuals entering the teaching profession take the *Praxis II* tests as part of the teacher licensing and certification process required by many states. In addition, some professional associations and organizations require *Praxis II* tests for professional licensing.

Do all states require these tests?

The *Praxis Series* tests are currently required for teacher licensure in approximately 40 states and U.S. territories. These tests are also used by several professional licensing agencies and by several hundred colleges and universities. Teacher candidates can test in one state and submit their scores in any other state that requires *Praxis* testing for licensure. You can find details at www.ets.org/praxis/states.

What is licensure/certification?

Licensure in any area—medicine, law, architecture, accounting, cosmetology—is an assurance to the public that the person holding the license possesses sufficient knowledge and skills to perform important occupational activities safely and effectively. In the case of teacher licensing, a license tells the public that the individual has met pre-defined competency standards for beginning teaching practice.

Because a license makes such a serious claim about its holder, licensure tests are usually quite demanding. In some fields, licensure tests have more than one part and last for more than one day. Candidates for licensure in all fields plan intensive study as part of their professional preparation. Some join study groups, others study alone. But preparing to take a licensure test is, in all cases, a professional activity. Because it assesses the entire body of knowledge for the field you are entering, preparing for a licensure exam takes planning, discipline, and sustained effort.

Why does my state require *The Praxis Series* tests?

Your state chose *The Praxis Series* tests because they assess the breadth and depth of content—called the “domain”—that your state wants its teachers to possess before they begin to teach. The level of content knowledge, reflected in the passing score, is based on recommendations of panels of teachers and teacher educators in each subject area. The state licensing agency and, in some states, the state legislature ratify the passing scores that have been recommended by panels of teachers.

How were the tests developed?

ETS consulted with practicing teachers and teacher educators around the country during every step of *The Praxis Series* test development process. First, ETS asked them which knowledge and skills a beginning teacher needs to be effective. Their responses were then ranked in order of importance and reviewed by hundreds of teachers.

After the results were analyzed and consensus was reached, guidelines, or specifications, for the multiple-choice and constructed-response tests were developed by teachers and teacher educators. Following these guidelines, teachers and professional test developers created test questions that met content requirements and ETS Standards for Quality and Fairness.*

When your state adopted the research-based *Praxis* tests, local panels of teachers and teacher educators evaluated each question for its relevance to beginning teachers in your state. During this “validity study,” the panel also provided a passing-score recommendation based on how many of the test questions a beginning teacher in your state would be able to answer correctly. Your state’s licensing agency determined the final passing-score requirement.

ETS follows well-established industry procedures and standards designed to ensure that the tests measure what they are intended to measure. When you pass the *Praxis* tests your state requires, you are proving that you have the knowledge and skills you need to begin your teaching career.

*ETS Standards for Quality and Fairness (2003, Princeton, NJ) are consistent with the “Standards for Educational and Psychological Testing,” industry standards issued jointly by the American Educational Research Association, the American Psychological Association, and the National Council on Measurement in Education (1999, Washington, DC).

How are the tests updated to ensure the content remains current?

Praxis tests are reviewed regularly. During the first phase of review, ETS conducts an analysis of relevant state and association standards and of the current test content. State licensure titles and the results of relevant job analyses are also considered. Revised test questions are then produced following the standard test development methodology. National advisory committees may also be convened to review existing test specifications and to evaluate test forms for alignment with the specifications.

How long will it take to receive my scores?

Scores for computer-delivered tests are available faster than scores for paper-delivered tests. Scores for most computer-delivered multiple-choice tests are reported on the screen immediately after the test. Scores for tests that contain constructed-response questions or essays aren't available immediately after the test because of the scoring process involved. Official scores for computer-delivered tests are reported to you and your designated score recipients approximately two to three weeks after the test date. Scores for paper-delivered tests will be available within four weeks after the test date. See the Test Dates and Deadlines calendar at www.ets.org/praxis/register/centers_dates for exact score reporting dates.

Can I access my scores on the web?

All test takers can access their test scores via their *Praxis* account free of charge for one year from the posting date. This online access replaces the mailing of a paper score report.

The process is easy—simply log in to your *Praxis* account at www.ets.org/praxis and click on your score report. If you do not already have a *Praxis* account, you must create one to view your scores.

Note: You must create a *Praxis* account to access your scores, even if you registered by mail or phone.

Your teaching career is worth preparing for, so start today!
Let the *Praxis*™ *Study Companion* guide you.



To search for the *Praxis* test prep resources
that meet your specific needs, visit:

www.ets.org/praxis/testprep

To purchase official test prep made by the creators
of the *Praxis* tests, visit the ETS Store:

www.ets.org/praxis/store

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