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37	A	B	C	D	E
38	A	B	C	D	E
39	A	B	C	D	E

PRACTICE QUESTIONS

Certification Board for Music Therapists (CBMT)

FMB966YU

Music Therapy Examination

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for Certification Board for Music Therapists (CBMT) **FMB966YU**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **FMB966YU**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1

SINGLE CHOICE

A music therapist is composing an original song with a client in a major key. The client requests a chord progression that resolves to the tonic and contains the subdominant (IV) and dominant (V) chords. Which progression in the key of C major correctly represents this harmonic structure?

- ☐ A C – Dm – Em – F
- ☐ B C – Am – Dm – G
- ☒ C C – F – G – C
- ☐ D C – G – Am – F

ANSWER C

WHY In the key of C major, the subdominant (IV) chord is F and the dominant (V) chord is G, both resolving back to the tonic (I) chord, C. The progression C–F–G–C (I–IV–V–I) is the classic authentic cadence pattern that fulfills the client's request. Option A uses I–ii–iii–IV (a stepwise pattern that does not include V or a tonic resolution). Option B uses I–vi–ii–V (a circle-of-fifths pattern that begins on tonic but does not include IV or resolve to tonic). Option D uses I–V–vi–IV (the '50s progression), which contains V but not IV and does not resolve to tonic.

QUESTION 2

SINGLE CHOICE

A client with cognitive limitations expresses agitation during a group drumming session. Which instrument is most appropriate for the music therapist to offer as an alternative, given its ease of handling, minimal fine-motor demands, and capacity for sustained rhythmic participation?

- ☒ **A** Tambourine
- ☐ **B** Marimba
- ☐ **C** Djembe
- ☐ **D** Snare drum with attached snare stand

ANSWER A

WHY A tambourine is handheld, requires only gross motor movement to shake or strike with the palm, has no complex tuning, and offers immediate rhythmic participation with low cognitive demand, making it ideal for redirecting an agitated client with cognitive limitations. A marimba requires mallet technique and coordinated two-handed striking. A djembe, while a hand drum, requires specific striking techniques and more sustained postural control. A snare drum on a stand involves fine-motor skills with sticks and is typically used with a specialized playing position.

QUESTION 3

SINGLE CHOICE

During the initial assessment, a music therapist gathers information about a client's musical preferences, cultural background, communication style, and motor abilities. Which additional component is essential to include in a comprehensive music therapy assessment?

- ☐ A The client's favorite genre of popular music
- ☒ B The client's musical responses and engagement patterns observed during clinical music interventions
- ☐ C A list of instruments available in the music therapy room
- ☐ D The client's grade-point average from previous schooling

ANSWER B

WHY A comprehensive music therapy assessment must include direct observation of the client's musical responses and engagement patterns during clinical music interventions, because these observations provide objective data about the client's strengths, needs, and responses that inform treatment planning. While preference for a genre (A) may be useful contextual information, it is not an assessment of functioning. Available instruments (C) are an environmental resource, not client data. Academic grade-point average (D) is unrelated to the music therapy assessment process.

QUESTION 4

SINGLE CHOICE

A music therapist working with a young child diagnosed with autism spectrum disorder uses structured, repetitive rhythmic patterns paired with visual cues to support communication and social engagement. Which evidence-based music therapy intervention is the therapist most likely implementing?

- ☐ A Improvisational music therapy
- ☒ B Rhythmic Entrainment Intervention
- ☐ C Songwriting
- ☐ D Lyric discussion

ANSWER B

WHY Rhythmic Entrainment Intervention uses structured, repetitive rhythmic patterns often paired with multimodal cues to address communication, motor, and social-emotional goals in clients with autism and other neurological conditions. Improvisational music therapy (A) relies on spontaneous, client-led musical creation rather than structured rhythmic patterns. Songwriting (C) involves collaborative composition of original songs with lyrics. Lyric discussion (D) centers on the analysis of pre-existing song lyrics and their personal meaning.

QUESTION 5

SINGLE CHOICE

A music therapist receives a referral from a physician for a client in an inpatient psychiatric unit. The therapist has not yet completed the formal assessment but is asked by the nursing staff to begin group music sessions immediately due to staffing needs. According to the CBMT Code of Professional Practice, what is the most appropriate course of action?

- ☐ A Begin group sessions immediately to support the unit's needs
- ☐ B Decline all music therapy services until discharge
- ☒ C Decline to provide music therapy services until a complete assessment has been completed and an individualized treatment plan has been developed
- ☐ D Provide only receptive music listening interventions without an assessment

ANSWER C

WHY The CBMT Code of Professional Practice requires that music therapy services be delivered only after a thorough assessment has been completed and an individualized treatment plan has been developed based on assessment findings. Beginning sessions without an assessment (A) violates the standards of competent practice. Declining all services until discharge (B) abandons the client unnecessarily. Providing only receptive interventions without an assessment (D) still bypasses the required assessment and treatment-planning process.

QUESTION 6

SINGLE CHOICE

A board-certified music therapist is documenting a session in a client's medical record. Which element is required for the documentation to meet professional and reimbursement standards?

- ☐ A A subjective narrative of the therapist's feelings during the session
- ☒ B A clear statement of the client's response to interventions, progress toward goals, and the therapist's clinical impression
- ☐ C A copy of the music used during the session
- ☐ D The names of all staff members present in the unit during the session

ANSWER B

WHY Documentation of a music therapy session must objectively reflect the client's response to interventions, the progress made toward established goals, and the therapist's clinical impression to meet professional standards and the requirements of third-party reimbursement. Personal feelings of the therapist (A) are not appropriate for clinical documentation. A copy of the music (C) is not a required documentation element. The names of all staff members on the unit (D) are not part of music therapy documentation requirements.

QUESTION 7

SINGLE CHOICE

A music therapist facilitates a session in which a client with traumatic brain injury plays simple, repetitive rhythms on a drum while the therapist plays a steady, predictable pulse on a keyboard in the background. This technique primarily supports which therapeutic goal?

- ☒ **A** Cognitive rehabilitation through rhythmic entrainment to support motor timing and coordination
- ☐ **B** Linguistic processing through melodic intonation
- ☐ **C** Insight-oriented exploration through musical improvisation
- ☐ **D** Long-term memory recall through familiar song performance

ANSWER A

WHY Playing repetitive rhythms in synchrony with a steady external pulse utilizes rhythmic entrainment, a technique commonly used in neurologic music therapy to address motor timing, coordination, and cognitive-motor rehabilitation in clients with traumatic brain injury. Melodic intonation therapy (B) is a structured speech-language intervention using sung phrases to support expressive language. Improvisational exploration (C) focuses on emotional and psychological processing. Familiar song performance (D) targets autobiographical memory and is most often used in dementia or cognitive-stimulation contexts.

QUESTION 8

SINGLE CHOICE

A music therapist leading a session transposes a familiar song from the key of G major to the key of A major for a client whose vocal range requires higher pitches. How many semitones must each pitch be raised to accomplish this transposition?

- ☒ **A** Two semitones
- ☐ **B** Three semitones
- ☐ **C** Five semitones
- ☐ **D** Seven semitones

ANSWER A

WHY Transposing from G major to A major requires raising every pitch by a whole step, which equals two semitones. The interval from G to A is a major second (whole step), so all notes must shift upward by that same interval to remain in the same scalar position in the new key. Three semitones (B) would result in B-flat major. Five semitones (C) would result in C major. Seven semitones (D) would result in D major.

QUESTION 9

MULTIPLE CHOICE

A music therapist is developing measurable treatment goals for a client recovering from a cerebrovascular accident (stroke) who demonstrates left-sided weakness and expressive aphasia. Which of the following are appropriate components of a measurable music therapy treatment goal? (Choose two.)

- ☒ **A** A specific, observable behavior to be demonstrated by the client
- ☐ **B** A vague, general statement of intent such as 'improve functioning'
- ☒ **C** A measurable criterion or timeframe for achievement
- ☐ **D** A list of the therapist's favorite interventions

ANSWER **A • C**

WHY Measurable treatment goals must include a specific, observable behavior (A) that can be objectively assessed, and a measurable criterion or timeframe (C) that allows the therapist to determine when the goal has been met. Vague statements such as 'improve functioning' (B) are not measurable. A list of the therapist's preferred interventions (D) is not part of the goal statement itself; interventions are selected after goals are established.