



Cosmetology

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Practice Questions

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1. Which level of decontamination completely destroys all microbial life, including spores?

- A. Sterilization
- B. Antisepsis
- C. Sanitation
- D. Disinfection

2. Before disinfecting a non-porous implement, the FIRST required step is to:

- A. Physically clean it to remove all visible debris and biofilm
- B. Immerse it in an EPA-registered disinfectant for 10 minutes
- C. Rinse it under cool running water only
- D. Soak it in isopropyl alcohol for 5 minutes

3. A Safety Data Sheet (SDS) is required to include how many sections according to OSHA's Hazard Communication Standard?

- A. 8
- B. 10
- C. 16
- D. 20

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4. Single-use items such as wooden cuticle sticks and orangewood sticks must be:

- A. Disinfected in hospital-grade solution between clients
- B. Discarded after use on one client and never reused
- C. Autoclaved after each use and reused
- D. Stored dry in a sealed container for reuse the same day



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5. Standard Precautions require that cosmetologists treat the blood and body fluids of EVERY client as if they are:

- A. Potentially infectious regardless of the client's apparent health
- B. Safe to contact as long as the cosmetologist wears a face mask
- C. Infectious only when the client has visible open wounds
- D. Free of all pathogens unless the client discloses an illness

6. An EPA-registered, hospital-grade disinfectant is properly prepared and a metal nail implement is fully immersed. According to Milady standard protocol, the minimum immersion contact time is typically:

- A. 30 minutes
- B. 10 minutes
- C. 30 seconds
- D. 5 minutes

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7. Which type of disinfectant is most commonly recommended in salon settings because it is effective against HIV, HBV, bacteria, and fungi when used at the correct dilution?

- A. Quaternary ammonium compounds (quats)
- B. Isopropyl alcohol 40%
- C. Household bleach diluted 1:100
- D. Phenolics at full concentration

8. After a cosmetologist accidentally cuts a client and blood is present, the CORRECT immediate action under bloodborne pathogen protocols is to:

- A. Apply a disinfectant directly to the open wound to prevent infection
- B. Wipe the area with a dry towel and resume the service
- C. Stop the service, put on gloves, clean and bandage the wound, and discard all contaminated single-use items
- D. Continue the service using a gloved hand only

9. Disinfectant solution in a salon wet sanitizer must be changed:

- A. Once per week regardless of use
- B. Daily or more often if it becomes contaminated or diluted
- C. Every two weeks if the container remains covered
- D. Only when it appears visibly cloudy



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10. An autoclave achieves sterilization by using:

- A. Ultraviolet light at 254 nm wavelength for 20 minutes
- B. Immersion in a 10% bleach solution for 30 minutes
- C. Pressurized steam at approximately 250°F (121°C) for a set time
- D. Dry heat at 160°F (71°C) for 10 minutes

11. Which statement about ultraviolet (UV) sanitizing cabinets is CORRECT according to standard cosmetology curriculum?

- A. UV cabinets may be used only to store already-disinfected implements and do not disinfect
- B. UV cabinets achieve sterilization and can replace EPA-registered chemical disinfectants
- C. UV cabinets are effective against all spores and viruses within 5 minutes
- D. UV cabinets are an approved method of disinfection in most state board regulations

12. A cosmetologist is mixing a new batch of sodium hypochlorite (bleach) disinfectant solution. The standard effective dilution for salon disinfection of surfaces is:

- A. 1 part bleach to 5 parts water (1:5)
- B. 1 part bleach to 100 parts water (1:100)
- C. 1 part bleach to 10 parts water (1:10)
- D. 1 part bleach to 50 parts water (1:50)

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13. Under OSHA's Bloodborne Pathogen Standard (29 CFR 1910.1030), which of the following is classified as an 'Other Potentially Infectious Material' (OPIM) that requires Standard Precautions?

- A. Cerebrospinal fluid
- B. Intact, dry skin with no visible lesions
- C. Sweat from an actively infected individual
- D. Saliva not visibly contaminated with blood



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14. A client's skin shows no active infection, but the cosmetologist notices a small healing abrasion on the client's forearm during a waxing service. According to Standard Precautions and infection-control best practice, the cosmetologist should:

- A. Proceed without modification since the wound is healing and not actively bleeding
- B. Refuse to complete the service and refer the client to a physician
- C. Cover the abrasion with a bandage, wear gloves during the service, and avoid direct contact with the compromised skin
- D. Apply the wax directly over the area to seal it and prevent contamination

15. Which layer of the hair shaft is the outermost protective covering, made up of overlapping scale-like cells?

- A. Medulla
- B. Cortex
- C. Papilla
- D. Cuticle

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16. During which phase of the hair growth cycle does the hair follicle rest completely and the hair is retained but no longer growing?

- A. Anagen
- B. Catagen
- C. Telogen
- D. Kenogen

17. Before shampooing a client, a cosmetologist places a waterproof cape and a towel around the client's neck. This procedure is called:

- A. Draping
- B. Emulsifying
- C. Sectioning
- D. Disinfecting

18. Which layer of the hair shaft contains the melanin pigment that gives hair its natural color?

- A. Cortex
- B. Arrector pili
- C. Medulla
- D. Cuticle



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19. Which scalp condition is characterized by excessive shedding of dead epidermal cells from the scalp, often appearing as white flakes?

- A. Dandruff (pityriasis)
- B. Alopecia areata
- C. Pediculosis capitis
- D. Tinea capitis

20. A client's scalp shows small, red, raised areas around the hair follicles. This condition is most accurately described as:

- A. Folliculitis
- B. Seborrhea
- C. Fragilitas crinium
- D. Canities

21. When performing a basic haircut, the term 'elevation' refers to:

- A. The direction in which the hair is combed before cutting
- B. The length guide established at the beginning of the haircut
- C. The number of sections the hair is divided into
- D. The angle at which the hair section is held away from the head before cutting

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22. A cosmetologist notices a client has an itchy scalp with oval, yellowish-white nits attached to the hair shafts. The correct professional response is to:

- A. Politely decline the service and refer the client to a physician
- B. Apply a medicated shampoo and proceed with the service
- C. Drape the client with an extra towel and complete the haircut quickly
- D. Disinfect the tools and continue with a scalp massage



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23. Which of the following correctly describes the function of the hair's medulla?

- A. It is the innermost layer of the hair shaft, present in coarse or thick hair, with an unclear but non-structural role
- B. It provides the hair's tensile strength and elasticity
- C. It produces the sebum that coats and protects the hair shaft
- D. It controls the rate of hair growth from the follicle base

24. During the catagen phase of the hair growth cycle, which of the following occurs?

- A. The hair is shed and a new anagen phase begins immediately
- B. Rapid mitotic cell division in the hair matrix produces new hair cells
- C. The follicle is completely inactive and no cell activity takes place
- D. The follicle transitions and shrinks as cell production slows and the hair detaches from the papilla

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25. A client with tinea capitis should be treated with:

- A. Hydrogen peroxide applied to the affected area before the haircut
- B. No cosmetology service; the client must be referred to a physician for antifungal treatment
- C. A conditioning shampoo and scalp massage to stimulate circulation
- D. An antibacterial shampoo recommended by the cosmetologist

26. When performing a blunt, one-length haircut, the cosmetologist uses a stationary guideline and cuts all subsequent sections to match it. This guideline technique is most accurately described as a:

- A. Traveling guideline
- B. Perimeter or stationary guideline
- C. Pivoting guideline
- D. Interior guideline

27. A cosmetologist is about to shampoo a client who has visible open lesions and abrasions on the scalp. Which infection-control principle most directly requires the cosmetologist to decline the shampoo service?

- A. Open lesions represent a contraindication because they create a portal of entry for pathogens, elevating transmission risk for both client and cosmetologist
- B. The cosmetologist must first sterilize all implements in an autoclave before touching broken skin
- C. EPA-registered disinfectants must be applied to the scalp before water contact
- D. Standard precautions require treating all clients as potentially infectious regardless of visible lesions



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28. Alopecia areata is best characterized as:

- A. Progressive, diffuse hair loss caused by prolonged, excessive tension on the hair shaft from tight hairstyles
- B. Diffuse hair shedding triggered by severe physical or emotional stress occurring 2–3 months after the stressor
- C. A patchy, non-scarring hair loss condition believed to be an autoimmune response where the body attacks its own hair follicles
- D. Gradual hair thinning caused by the conversion of terminal follicles to vellus follicles under the influence of DHT

29. Permanent waving solution (waving lotion) works by breaking which type of bond in the hair's cortex?

- A. Hydrogen bonds
- B. Peptide bonds
- C. Disulfide bonds
- D. Salt bonds

30. After the waving lotion has processed, the neutralizer is applied during a permanent wave service. What is the primary function of the neutralizer?

- A. To swell the cuticle so color can penetrate
- B. To remove the alkaline waving lotion from the scalp
- C. To lower the hair's porosity before rinsing
- D. To re-form disulfide bonds in the hair's new shape



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Answer Key & Explanations

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1. A — Sterilization

Sterilization is the only process that destroys all microbial life including the most resistant bacterial spores; sanitation and disinfection reduce pathogens but do not achieve this absolute level.

2. A — Physically clean it to remove all visible debris and biofilm

Cleaning to remove all visible organic matter must occur before disinfection because soil and biofilm prevent the disinfectant from making full contact with the surface of the implement.

3. C — 16

OSHA's HazCom Standard (29 CFR 1910.1200) mandates that every SDS contain exactly 16 standardized sections covering identity, hazards, composition, first aid, handling, and emergency response.

4. B — Discarded after use on one client and never reused

Single-use (disposable) implements are porous and cannot be adequately disinfected, so cosmetology regulations require they be discarded immediately after use on a single client.

5. A — Potentially infectious regardless of the client's apparent health

Standard Precautions, established by the CDC, require treating all blood and potentially infectious body fluids as hazardous regardless of the client's known or disclosed health status.

6. B — 10 minutes

Standard cosmetology curriculum specifies that non-porous implements must remain fully immersed in an EPA-registered disinfectant for a minimum of 10 minutes to achieve effective disinfection.

7. A — Quaternary ammonium compounds (quats)

Quaternary ammonium compounds are EPA-registered, hospital-grade disinfectants widely used in salons because they are broad-spectrum, relatively safe on skin, and effective against HIV, HBV, bacteria, and fungi at proper dilution.

8. C — Stop the service, put on gloves, clean and bandage the wound, and discard all contaminated single-use items

OSHA bloodborne pathogen standards require immediately stopping service, donning gloves, controlling the bleeding, bandaging the wound, and properly disposing of all single-use contaminated materials.

9. B — Daily or more often if it becomes contaminated or diluted

Disinfectant solutions lose efficacy when contaminated with organic matter or when diluted, so state boards and Milady curriculum require solutions to be changed daily or immediately upon contamination.

10. C — Pressurized steam at approximately 250°F (121°C) for a set time

An autoclave sterilizes instruments by exposing them to pressurized saturated steam at approximately 121°C (250°F), which denatures proteins and destroys all microbial life including spores.



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11. A — UV cabinets may be used only to store already-disinfected implements and do not disinfect

UV sanitizing cabinets do not penetrate all surfaces and are not EPA-registered as disinfectants; they are only approved for storing previously cleaned and disinfected tools, not for achieving disinfection.

12. B — 1 part bleach to 100 parts water (1:100)

A 1:100 dilution of household bleach (yielding approximately 500–600 ppm available chlorine) is the CDC- and Milady-recommended concentration for disinfecting non-porous salon surfaces against bloodborne pathogens including HIV and HBV.

13. A — Cerebrospinal fluid

OSHA's Bloodborne Pathogen Standard explicitly lists cerebrospinal fluid as an OPIM requiring Standard Precautions, whereas sweat and saliva without visible blood contamination are not classified as OPIMs under the standard.

14. C — Cover the abrasion with a bandage, wear gloves during the service, and avoid direct contact with the compromised skin

Standard Precautions require treating any break in skin integrity as a potential route for pathogen transmission; the cosmetologist must protect both the client and themselves by covering the area and using personal protective equipment.

15. D — Cuticle

The cuticle is the outermost layer of the hair shaft, consisting of overlapping, transparent, scale-like cells that protect the inner layers from damage.

16. C — Telogen

The telogen phase is the resting stage of the hair growth cycle, during which the follicle is inactive and the club hair is retained until it is shed and replaced by new growth.

17. A — Draping

Draping is the process of covering the client with a waterproof cape and towels to protect their clothing and skin from water, chemicals, and hair clippings during a service.

18. A — Cortex

The cortex is the middle layer of the hair shaft and contains melanin granules (eumelanin and pheomelanin) that are responsible for the hair's natural color.

19. A — Dandruff (pityriasis)

Dandruff, technically known as pityriasis, is the most common scalp disorder and is characterized by excessive shedding of dead skin cells from the scalp, visible as white or yellowish flakes.

20. A — Folliculitis

Folliculitis is an inflammation of the hair follicles, typically presenting as red, raised pustules or papules around individual follicle openings, and may be caused by bacterial infection or mechanical irritation.

21. D — The angle at which the hair section is held away from the head before cutting

Elevation (also called projection or lifting) is the angle at which the hair is held away from the scalp during cutting; higher elevation creates more layering and graduation, while zero elevation produces a blunt, one-length effect.



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22. A — Politely decline the service and refer the client to a physician

Pediculosis capitis (head lice) is a contagious infestation; the cosmetologist must not perform the service on an infested client, must sanitize and disinfect all exposed surfaces, and should refer the client to a physician for treatment.

23. A — It is the innermost layer of the hair shaft, present in coarse or thick hair, with an unclear but non-structural role

The medulla is the innermost, central layer of the hair shaft; it is present primarily in coarse or terminal hair and absent in fine hair, and does not contribute significantly to hair strength or elasticity.

24. D — The follicle transitions and shrinks as cell production slows and the hair detaches from the papilla

Catagen is a brief transitional phase lasting 1–2 weeks, during which cell division in the hair matrix slows and then stops, the follicle shrinks, and the hair detaches from the dermal papilla to form a club hair.

25. B — No cosmetology service; the client must be referred to a physician for antifungal treatment

Tinea capitis is a contagious fungal infection of the scalp; cosmetologists are prohibited from treating any contagious scalp disorder and must refer affected clients to a licensed physician.

26. B — Perimeter or stationary guideline

A stationary (or perimeter) guideline remains in a fixed position and is not moved as subsequent sections are cut; it is the foundation of the one-length blunt cut and ensures uniform length throughout.

27. A — Open lesions represent a contraindication because they create a portal of entry for pathogens, elevating transmission risk for both client and cosmetologist

Open lesions and abrasions on the scalp are a contraindication to shampooing because broken skin provides a direct portal of entry for pathogens; performing the service could harm the client and expose the cosmetologist to bloodborne or other pathogens.

28. C — A patchy, non-scarring hair loss condition believed to be an autoimmune response where the body attacks its own hair follicles

Alopecia areata is classified as an autoimmune condition in which the immune system mistakenly attacks hair follicles, producing well-defined, smooth, patchy areas of non-scarring hair loss that can occur anywhere on the scalp or body.

29. C — Disulfide bonds

Permanent waving lotion is an alkaline reducing agent that breaks the strong disulfide (cystine) bonds in the cortex, allowing the hair to be reshaped around a rod.

30. D — To re-form disulfide bonds in the hair's new shape

The neutralizer is an oxidizing agent that re-forms (rebuilds) the disulfide bonds in their new configuration around the rod, locking in the curl pattern.



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