CERTIFIED ADDICTIONS REGISTERED NURSE (CARN) ADVANCED PRACTICE (AP) PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

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How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

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Questions

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1. What gene is involved in alcohol flushing?

A. GABRA6

B. ALDH5A1

C. ADH1B

D. CYP2E1

2. What is the lifetime prevalence of nicotine use?

A. 12.5%

B. 24.3%

C. 29.6%

D. 27.9%

3. Endogenous opioids have what effect on pain and mood?

A. Increase pain and decrease mood

B. Reduce pain and increase euphoria

C. Have no effect on pain

D. Increase pain and increase anxiety

4. ALDH5A1 is best described as which type of biomolecule?

A. A gene encoding a metabolic enzyme

B. A receptor

C. A neurotransmitter

D. A lipid

5. Which trio represents the three stimulant drug categories?

A. Stimulants, depressants, hallucinogens

B. Analeptics, amphetamines, and anorexiants

C. Opioids, stimulants, sedatives

D. Analeptics, amphetamines, and cannabinoids

6. Analeptics are best described as drugs that do what?

A. Drugs that depress the central nervous system

B. Drugs that stimulate the respiratory center

C. Drugs that reduce fever

D. Drugs that paralyze muscles

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7. Which DSM-5 criterion refers to neglecting major life roles and social/interpersonal problems due to substance use?

A. Neglected major life roles

B. Tolerance

C. Withdrawal symptoms

D. Craving

8. What is the primary goal of cognitive-behavioral therapy (CBT)?

A. Psychoanalytic exploration of unconscious conflicts

B. Action therapy in which the goal is to help clients overcome problems by learning to think more rationally and logically

C. Exposure therapy only for phobias

D. Medication management

9. Methadone is an opioid: antagonist or agonist?

A. Antagonist

B. Agonist

C. Partial agonist

D. Mixed agonist-antagonist

10. Which statement about nicotine prevalence is true?

A. 12-month prevalence is 30%

B. Lifetime prevalence is 50%

C. 12-month prevalence is 20%

D. Lifetime prevalence is 15%

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Answers

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

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Explanations

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1. What gene is involved in alcohol flushing?

A. GABRA6

B. ALDH5A1

C. ADH1B

D. CYP2E1

*Alcohol flushing occurs when acetaldehyde, a toxic intermediate in alcohol metabolism, builds up because the enzyme that clears it is not working well. The gene that controls this detoxifier is ALDH2, which encodes aldehyde dehydrogenase 2 in the mitochondria. A common variant, ALDH2*2, dramatically reduces this enzyme's activity, so acetaldehyde accumulates after drinking and triggers the characteristic flushing, warmth, rapid pulse, and nausea. The other genes listed don't directly explain the flush. GABRA6 encodes a GABA receptor subunit, not involved in acetaldehyde breakdown. ALDH5A1 is involved in GABA metabolism, not the clearance of acetaldehyde. ADH1B influences how quickly ethanol is converted to acetaldehyde (affecting how much acetaldehyde is produced), and CYP2E1 metabolizes ethanol via a different pathway—these can affect overall exposure but the flush itself is classically due to ALDH2 deficiency.*

2. What is the lifetime prevalence of nicotine use?

A. 12.5%

B. 24.3%

C. 29.6%

D. 27.9%

Lifetime prevalence measures the proportion of people who have ever used nicotine at least once in their life up to the survey date. It's a cumulative, not current, measure — it includes anyone who has tried nicotine and may no longer be using it now. The value 27.9% reflects the estimated share of individuals who have ever used nicotine, which sits around a one-quarter to one-third lifetime exposure in many adult populations. This differs from current-use or past-year prevalence, which would be lower because they count only recent or ongoing use. The other numbers represent those shorter-term or different definitions, but the lifetime exposure figure centers on those who have ever tried nicotine, making 27.9% the best match.

3. Endogenous opioids have what effect on pain and mood?

A. Increase pain and decrease mood

B. Reduce pain and increase euphoria

C. Have no effect on pain

D. Increase pain and increase anxiety

Endogenous opioids modulate both pain and mood by activating opioid receptors in the central nervous system. When these natural opioids (endorphins, enkephalins, and dynorphins) bind to mu, delta, and kappa receptors, they dampen the transmission of pain signals and also engage reward/mood pathways, producing analgesia and a sense of well-being or euphoria. That combination—lowered pain perception and increased mood—is why the option describing reduced pain and increased euphoria is the best fit. They don't typically increase pain or anxiety, and they do have a real, not absent, effect on pain and mood.

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4. ALDH5A1 is best described as which type of biomolecule?

A. A gene encoding a metabolic enzyme

B. A receptor

C. A neurotransmitter

D. A lipid

ALDH5A1 is a gene encoding a metabolic enzyme. It provides the instructions to make succinic semialdehyde dehydrogenase (SSADH), a mitochondrial enzyme that oxidizes succinic semialdehyde to succinate in the GABA degradation pathway. Because ALDH5A1 refers to the genetic locus that codes for this enzyme, it is best described as a gene encoding a metabolic enzyme. It is not a receptor, not a neurotransmitter, and not a lipid.

5. Which trio represents the three stimulant drug categories?

A. Stimulants, depressants, hallucinogens

B. Analeptics, amphetamines, and anorexiants

C. Opioids, stimulants, sedatives

D. Analeptics, amphetamines, and cannabinoids

Stimulants are drugs that increase activity in the central nervous system, and they're categorized by their typical clinical use and mechanism. The three recognized stimulant categories are analeptics, amphetamines, and anorexiants. Analeptics are CNS stimulants used to counteract respiratory or overall depression and to promote arousal. Amphetamines are well-known potent CNS stimulants that boost alertness and energy. Anorexiants are appetite-suppressing agents with stimulant-like effects on the brain, helping reduce hunger. This combination correctly groups three distinct stimulant categories. The other options mix in non-stimulant drug classes (depressants, opioids, hallucinogens, cannabinoids), which aren't part of the stimulant trio.

6. Analeptics are best described as drugs that do what?

A. Drugs that depress the central nervous system

B. Drugs that stimulate the respiratory center

C. Drugs that reduce fever

D. Drugs that paralyze muscles

Analeptics act by stimulating the brain's respiratory center to increase the drive to breathe. They are central stimulants that raise respiratory rate and depth, helping to counteract respiratory depression from opioids, anesthesia, or hypoventilation. This makes them the right choice because the core action described is boosting respiration, rather than depressing the CNS, reducing fever, or causing muscle paralysis. Classic examples include agents like doxapram and caffeine.

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7. Which DSM-5 criterion refers to neglecting major life roles and social/interpersonal problems due to substance use?

A. Neglected major life roles

B. Tolerance

C. Withdrawal symptoms

D. Craving

The key idea is impairment in functioning due to substance use. One DSM-5 criterion specifically points to neglecting major life roles and causing social or interpersonal problems because of use. This captures how substance use can disrupt responsibilities at work, school, or home, and strain relationships, beyond the physical effects of the substance. Tolerance refers to needing more of the substance to achieve the same effect, and withdrawal involves physical or psychological symptoms when not using. Craving is a strong desire to use. These describe physiological or motivational aspects, not the social/role impairment highlighted here.

8. What is the primary goal of cognitive-behavioral therapy (CBT)?

A. Psychoanalytic exploration of unconscious conflicts

B. Action therapy in which the goal is to help clients overcome problems by learning to think more rationally and logically

C. Exposure therapy only for phobias

D. Medication management

CBT centers on how our thoughts shape our feelings and actions, and it trains people to identify distorted thinking, test its accuracy, and replace it with more rational, adaptive thoughts. The primary goal is to help clients overcome problems by learning to think more rationally and logically and to apply practical skills that change behavior and reduce distress. This makes CBT an active, structured, skills-based approach that uses techniques like cognitive restructuring, behavioral activation, and guided exposure when appropriate, all aimed at producing real-world improvements. Other approaches focus on uncovering unconscious conflicts from early life, which isn't the aim of CBT; exposure is a technique used within CBT, not the sole objective, and medication management involves pharmacotherapy rather than psychotherapy.

9. Methadone is an opioid: antagonist or agonist?

A. Antagonist

B. Agonist

C. Partial agonist

D. Mixed agonist-antagonist

Methadone acts as a full agonist at the mu-opioid receptor. As a full agonist, it activates the receptor to its maximal effect, producing analgesia, euphoria, and, importantly for opioid use disorder, suppression of withdrawal and cravings. Its long half-life makes it useful for maintenance therapy, but it also means dosing must be carefully managed to avoid accumulation and respiratory depression. It is not an antagonist, which would block the receptor and prevent opioid effects (and could precipitate withdrawal if given to someone dependent). It is not a partial agonist, which would produce only a partial maximal effect (examples include buprenorphine, which has a ceiling effect for respiratory depression). It is not a mixed agonist-antagonist, which would act as an agonist at some receptors and an antagonist at mu (such as pentazocine).

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10. Which statement about nicotine prevalence is true?

A. 12-month prevalence is 30%

B. Lifetime prevalence is 50%

C. 12-month prevalence is 20%

D. Lifetime prevalence is 15%

Understanding prevalence involves distinguishing how we measure use over time. A 12-month prevalence tells us who has used nicotine in the past year, while lifetime prevalence includes anyone who has ever used nicotine at any point in their life. Because someone who used nicotine in the past year obviously has used it at least once in their life, lifetime prevalence cannot be lower than the 12-month figure. The statement that the past-year prevalence is 20% fits with typical public-health estimates and sits correctly above any lower lifetime figure. It respects the natural order that past-year use is a subset of lifetime use. The other options either imply unusually high recent use (30%) or, if interpreted as a standalone lifetime figure (15%), would violate the expected relationship with any plausible past-year figure. Therefore, stating that 12-month prevalence is 20% is the most consistent and true statement.

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Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

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

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