

Certified Addictions Registered Nurse (CARN) Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of 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.

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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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. Which psychological assessment method evaluates cognitive interference related to color and word recognition?**
 - A. Minnesota Multiphasic Personality Inventory**
 - B. Beck Depression Inventory**
 - C. Stroop test**
 - D. Rorschach inkblot test**

- 2. Which psychotropic agent is known for a high incidence of extrapyramidal side effects?**
 - A. Risperidone**
 - B. Olanzapine**
 - C. Haloperidol**
 - D. Quetiapine**

- 3. What type of blocking agent is chlorpromazine classified as in cases of overdose?**
 - A. Beta-adrenergic**
 - B. Alpha-adrenergic**
 - C. Dopaminergic**
 - D. Sodium channel blocker**

- 4. Which first-generation antipsychotic drug is known for causing irreversible pigmentation of the retina with chronic use?**
 - A. Thioridazine**
 - B. Valproate**
 - C. Lamotrigine**
 - D. Baclofen**

- 5. In planning for pregnancy, what should schizophrenic patients ideally do regarding their medications?**
 - A. Increase dosage**
 - B. Stop using the drug**
 - C. Switch to another medication**
 - D. Consult with a physician only after conceiving**

6. During treatment, which neurochemical imbalance could lead to the experience of tinnitus in a patient?

- A. Serotonin deficiency**
- B. Dopaminergic activation**
- C. Increased norepinephrine**
- D. Lithium toxicity**

7. Self-injurious behavior is most commonly associated with which personality disorder?

- A. Narcissistic personality disorder**
- B. Borderline personality disorder**
- C. Antisocial personality disorder**
- D. Histrionic personality disorder**

8. According to the DSM-V, an overwhelming natural disaster is classified as a _____ stressor.

- A. Acute**
- B. Chronic**
- C. Catastrophic psychological**
- D. Natural**

9. Which symptom is characteristic of a patient on Benztropine who experiences a malfunction of nerve and muscle function in the intestine?

- A. Constipation**
- B. Diarrhea**
- C. Paralytic ileus**
- D. Gastroenteritis**

10. Nortriptyline is classified under which category of drugs?

- A. Monoamine oxidase inhibitors (MAOIs)**
- B. Selective serotonin reuptake inhibitors (SSRIs)**
- C. Tricyclic antidepressants (TCAs)**
- D. Serotonin-norepinephrine reuptake inhibitors (SNRIs)**

Answers

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

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Explanations

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- 1. Which psychological assessment method evaluates cognitive interference related to color and word recognition?**
 - A. Minnesota Multiphasic Personality Inventory**
 - B. Beck Depression Inventory**
 - C. Stroop test**
 - D. Rorschach inkblot test**

The Stroop test is a widely recognized psychological assessment method used to evaluate cognitive interference, specifically in the context of color and word recognition. This test involves presenting participants with words that are names of colors but are printed in non-matching ink colors. For example, the word "red" might be printed in blue ink. Participants are required to name the color of the ink rather than read the word itself, which creates a conflict where cognitive interference occurs. This conflict illustrates the challenge of selective attention and demonstrates how automatic processes (like reading) can interfere with more controlled processes (like color identification). On the other hand, the Minnesota Multiphasic Personality Inventory is primarily designed to assess personality traits and psychopathology rather than cognitive interference. The Beck Depression Inventory focuses specifically on measuring the severity of depression symptoms, and the Rorschach inkblot test is a projective psychological test that assesses an individual's perceptions and thought processes based on their interpretations of inkblots, without directly measuring cognitive interference. Thus, while these other assessments serve important purposes in psychology, they do not specifically evaluate the cognitive processes involved in the Stroop effect.

- 2. Which psychotropic agent is known for a high incidence of extrapyramidal side effects?**
 - A. Risperidone**
 - B. Olanzapine**
 - C. Haloperidol**
 - D. Quetiapine**

Haloperidol is well known for its high incidence of extrapyramidal side effects due to its status as a first-generation antipsychotic (typical antipsychotic). These side effects can include symptoms such as tremors, rigidity, bradykinesia, and tardive dyskinesia. The mechanism by which haloperidol produces these side effects is primarily related to its strong blockade of dopamine D2 receptors in the brain, particularly in the basal ganglia, which plays a crucial role in the coordination of movement. In contrast, the other medications listed, such as risperidone, olanzapine, and quetiapine, although they may have some potential for extrapyramidal symptoms, are atypical antipsychotics. These agents typically have a more balanced approach to dopamine receptor blockade and also affect serotonin receptors, which reduces the risk of extrapyramidal side effects compared to first-generation antipsychotics like haloperidol. As a result, haloperidol remains a key example when discussing psychotropic agents with a high rate of extrapyramidal symptoms.

3. What type of blocking agent is chlorpromazine classified as in cases of overdose?

- A. Beta-adrenergic**
- B. Alpha-adrenergic**
- C. Dopaminergic**
- D. Sodium channel blocker**

Chlorpromazine is classified as an alpha-adrenergic blocking agent in cases of overdose due to its pharmacological properties. As a typical antipsychotic medication, chlorpromazine primarily acts as a dopamine receptor antagonist. However, it also exhibits significant antagonist activity at alpha-adrenergic receptors. In the context of overdose, the alpha-adrenergic blocking effects can lead to hypotension and sedation, which are critical considerations for managing an overdose situation. The presence of antagonist activity at these receptors means that high doses of chlorpromazine can lead to vasodilation and decreased vascular resistance, contributing to low blood pressure. Recognizing chlorpromazine's role in blocking these adrenergic receptors helps healthcare providers anticipate and mitigate potential cardiovascular side effects during overdose management. This understanding is essential for effective treatment and stabilization of patients experiencing an adverse reaction to the drug. In contrast, other classifications such as beta-adrenergic, dopaminergic, or sodium channel blockers do not accurately characterize chlorpromazine's primary actions or the consequences of overdose. These classifications would imply different mechanisms and therapeutic implications that do not align with the established effects of chlorpromazine.

4. Which first-generation antipsychotic drug is known for causing irreversible pigmentation of the retina with chronic use?

- A. Thioridazine**
- B. Valproate**
- C. Lamotrigine**
- D. Baclofen**

Thioridazine is the first-generation antipsychotic drug known for causing irreversible pigmentation of the retina, particularly when used over long periods. This side effect is associated with its active metabolite, which can deposit in the retinal tissues, leading to potential vision changes. The significance of monitoring patients on thioridazine relates to the risk of developing retinal issues, which can be particularly concerning for long-term users. Patients may not be aware of these potential effects until they experience visual disturbances, making it crucial for healthcare providers to perform regular eye examinations for patients prescribed this medication. In contrast, the other medications listed—valproate, lamotrigine, and baclofen—are not first-generation antipsychotics and do not share the same risk of causing irreversible retina pigmentation. Valproate is primarily used for mood stabilization and seizure disorders. Lamotrigine is an anticonvulsant that can also be used for bipolar disorder, and baclofen is a muscle relaxant primarily indicated for spasticity. Due to their different mechanisms and indications, they do not have the retinal side effects associated with thioridazine.

5. In planning for pregnancy, what should schizophrenic patients ideally do regarding their medications?

- A. Increase dosage**
- B. Stop using the drug**
- C. Switch to another medication**
- D. Consult with a physician only after conceiving**

In the context of planning for pregnancy, it is crucial for individuals with schizophrenia to approach medication management thoughtfully to optimize both maternal and fetal health. The choice to stop using the drug prior to conception is understandable, particularly if the medication poses risks to developing fetal health. Many antipsychotic medications carry potential risks of teratogenic effects or other complications. However, it's essential to recognize that discontinuing medications abruptly can lead to exacerbation of psychiatric symptoms, which may adversely affect the individual's ability to care for themselves and any future child. Therefore, the emphasis on stopping the medication should be coupled with a comprehensive evaluation by a healthcare professional who can assess the risks versus benefits involved. The other options suggest switching medications or increasing dosage, which may not address the specific concern of potential fetal exposure to certain substances or managing the psychiatric condition safely. Consulting a physician only after conceiving limits the time for proactive management strategies and sufficient planning for both physical and mental health during and post-pregnancy. Comprehensive management that includes a proactive discussion with a healthcare provider prior to conception is the best approach to ensure the safety and health of both the mother and the child.

6. During treatment, which neurochemical imbalance could lead to the experience of tinnitus in a patient?

- A. Serotonin deficiency**
- B. Dopaminergic activation**
- C. Increased norepinephrine**
- D. Lithium toxicity**

Tinnitus, the perception of sound when no external sound is present, can indeed be related to neurochemical imbalances. In the context of lithium toxicity, it is essential to understand that lithium is often used in the treatment of bipolar disorder and may affect neurotransmitter systems within the brain, including those related to auditory processing and sensory perception. When lithium levels become excessively high (toxic), it can lead to various neurotoxic effects, one of which may include disturbances in the auditory system. Symptoms of lithium toxicity include tremors, confusion, and other neurological disturbances, which can manifest in sensory phenomena like tinnitus. This connection underscores the importance of monitoring lithium levels in patients to avoid toxic effects that may lead to such auditory disturbances. While serotonin deficiency, dopaminergic activation, and increased norepinephrine can have effects on mood, behavior, and other systemic functions, their direct link to tinnitus is not as prominent or well-documented as that of lithium toxicity. Each of these neurochemicals plays a role in various psychiatric and neurological conditions, but their relationship to tinnitus is more complex and less direct compared to the clear implications of lithium toxicity.

7. Self-injurious behavior is most commonly associated with which personality disorder?

- A. Narcissistic personality disorder**
- B. Borderline personality disorder**
- C. Antisocial personality disorder**
- D. Histrionic personality disorder**

Self-injurious behavior is most commonly associated with borderline personality disorder (BPD) due to the emotional dysregulation and intense interpersonal struggles characteristic of this condition. Individuals with BPD often experience overwhelming emotions and distress, leading them to engage in self-harm as a maladaptive coping mechanism to express their pain, avoid emotional numbness, or communicate their distress to others. This behavior can also reflect feelings of emptiness and identity disturbance that frequently accompany BPD. The impulsive nature of the disorder makes self-injury more likely as an immediate response to emotional pain or relationship issues. Understanding this connection is crucial for effective assessment and intervention strategies in treating individuals with BPD. The other personality disorders listed do not typically exhibit self-injurious behavior as a primary symptom, making them less relevant in this context.

8. According to the DSM-V, an overwhelming natural disaster is classified as a _____ stressor.

- A. Acute**
- B. Chronic**
- C. Catastrophic psychological**
- D. Natural**

In the context of the DSM-V, an overwhelming natural disaster is classified as a catastrophic psychological stressor. This classification indicates that such an event has the potential to cause significant psychological harm due to its intensity, suddenness, and impact on individuals and communities. Catastrophic stressors can lead to immediate and severe reactions, including post-traumatic stress disorder (PTSD), acute stress disorder, and other psychological disturbances. The classification of "catastrophic" reflects the unique nature of these stressors, which are typically life-threatening or cause severe disruption to normal functioning. Given that natural disasters often result in widespread destruction and psychological trauma to those affected, recognizing them as catastrophic stressors allows clinicians to better assess and treat the resulting mental health challenges. In contrast, acute stressors relate to short-term, immediate stressors that can evoke temporary distress, while chronic stressors refer to long-term, ongoing sources of stress that can impact psychological well-being over extended periods. A classification as "natural" does not adequately capture the intense psychological impact that these events typically provoke, hence the appropriateness of the term "catastrophic."

9. Which symptom is characteristic of a patient on Benztropine who experiences a malfunction of nerve and muscle function in the intestine?

- A. Constipation**
- B. Diarrhea**
- C. Paralytic ileus**
- D. Gastroenteritis**

The presence of paralytic ileus in a patient who is taking Benztropine is attributed to the medication's anticholinergic properties. Benztropine is primarily used to treat symptoms of Parkinson's disease and certain side effects of antipsychotic medications. It works by blocking the action of acetylcholine in the nervous system, which can lead to decreased intestinal motility and the dysfunction of nerve and muscle function in the intestines. When there is a malfunction in nerve and muscle function, the result is an absence of peristalsis, which is the normal wave-like contractions that move food through the digestive tract. This condition—a form of intestinal obstruction—can cause the intestines to become distended and leads to symptoms such as abdominal pain and inability to pass gas or stool. Therefore, paralytic ileus is a significant concern for patients on Benztropine, distinguishing it from other gastrointestinal issues, such as constipation, diarrhea, or gastroenteritis, which do not specifically reflect the dysfunction caused by the medication's interference with normal intestinal motility.

10. Nortriptyline is classified under which category of drugs?

- A. Monoamine oxidase inhibitors (MAOIs)**
- B. Selective serotonin reuptake inhibitors (SSRIs)**
- C. Tricyclic antidepressants (TCAs)**
- D. Serotonin-norepinephrine reuptake inhibitors (SNRIs)**

Nortriptyline is classified as a tricyclic antidepressant (TCA). This category of medications is known for its three-ring chemical structure and is primarily used to treat depression. TCAs function by inhibiting the reuptake of neurotransmitters, specifically norepinephrine and serotonin, which increases their levels in the synaptic cleft and contributes to their antidepressant effects. These drugs are often utilized for their efficacy in alleviating depressive symptoms and can also be effective for conditions such as anxiety disorders and certain types of chronic pain. Nortriptyline, in particular, is also used in some cases for neuropathic pain and migraine prevention. Other categories of drugs listed in the question, such as monoamine oxidase inhibitors (MAOIs), selective serotonin reuptake inhibitors (SSRIs), and serotonin-norepinephrine reuptake inhibitors (SNRIs), represent different mechanisms of action and specific uses, which distinguish them from TCAs like nortriptyline. Thus, understanding that nortriptyline is a TCA is crucial to accurately understanding its role in pharmacotherapy for mood disorders.

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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