

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

## Study Guide



**Everything you need from our exam experts!**

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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. 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!**

## Questions

- 1. How often does a person with bipolar disorder typically cycle through moods?**
  - A. Every few weeks**
  - B. Once a year**
  - C. Varies widely among individuals**
  - D. Every month**
- 2. 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**
- 3. What condition may be induced by the combination of Valproic acid and topiramate?**
  - A. Hyperammonemic encephalopathy**
  - B. Migraines**
  - C. Skin rash**
  - D. Obsessive-compulsive disorder**
- 4. What treatment approach is effective in acutely managing psychosocial impacts of drug abuse?**
  - A. Psychotherapy**
  - B. Pharmacotherapy**
  - C. Intervention strategies**
  - D. Support groups**
- 5. Neonates typically develop seizures due to drug withdrawal within how many hours after birth?**
  - A. 12**
  - B. 24**
  - C. 48**
  - D. 72**

- 6. How many questions does the Addiction Severity Index Test consist of?**
- A. 100**
  - B. 200**
  - C. 300**
  - D. 150**
- 7. What health risk is commonly associated with patterns of abusive alcohol use?**
- A. Pneumonia**
  - B. Chronic liver disease**
  - C. Rheumatoid arthritis**
  - D. Asthma**
- 8. Which type of reinforcement is characterized by complimenting a certain behavior every time?**
- A. Continuous reinforcement**
  - B. Variable reinforcement**
  - C. Positive reinforcement**
  - D. Negative reinforcement**
- 9. What is a common concern when prescribing Haloperidol due to its side effects?**
- A. Weight gain**
  - B. Extrapyrarnidal symptoms**
  - C. Hypertension**
  - D. Addiction potential**
- 10. A heroin addict buying a synthetic opioid contaminated with MPTP can develop damage leading to what neurological disease?**
- A. Huntington's disease**
  - B. Multiple sclerosis**
  - C. Parkinson's disease**
  - D. Alzheimer's disease**

## **Answers**

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

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## **Explanations**

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**1. How often does a person with bipolar disorder typically cycle through moods?**

**A. Every few weeks**

**B. Once a year**

**C. Varies widely among individuals**

**D. Every month**

A person with bipolar disorder typically experiences mood cycles that can vary widely among individuals, which makes the statement accurate. The nature of bipolar disorder can lead to episodes of mania, hypomania, and depression, and the duration, frequency, and severity of these episodes can differ significantly based on the individual's unique condition, treatment adherence, and other factors. For some individuals, mood cycles may occur frequently, even multiple times a year, while others might experience episodes separated by longer periods of stability. This variability is a hallmark of the disorder and is one reason why personalized treatment plans are essential in managing the condition effectively. While some might cycle every few weeks or monthly, this is not representative of all individuals with bipolar disorder; therefore, stating that the cycling varies widely among individuals provides a more comprehensive understanding of the disorder. The expectation of having a specific cycle, such as once a year or at regular intervals, does not align with the experiences of many people diagnosed with bipolar disorder, reinforcing why variability is a crucial characteristic of the illness.

**2. 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.

**3. What condition may be induced by the combination of Valproic acid and topiramate?**

- A. Hyperammonemic encephalopathy**
- B. Migraines**
- C. Skin rash**
- D. Obsessive-compulsive disorder**

The combination of Valproic acid and topiramate can indeed lead to hyperammonemic encephalopathy. Valproic acid, an anticonvulsant and mood-stabilizing drug, can cause an increase in ammonia levels, particularly in certain predisposed individuals, such as those with urea cycle disorders or in cases of concomitant use of other medications that affect ammonia metabolism. Topiramate can also contribute to this condition by interfering with ammonia metabolism and potentially leading to elevated ammonia levels in the blood. In hyperammonemic encephalopathy, the excess ammonia can result in neurological impairment due to its neurotoxic effects, leading to symptoms that may range from confusion and altered mental status to more severe outcomes such as seizures or coma if not addressed promptly. Recognizing this potential interaction is crucial for healthcare professionals managing patients on these medications to monitor for signs of elevated ammonia levels and intervene as necessary to prevent serious complications. While migraines, skin rash, and obsessive-compulsive disorder may occur in individuals taking these medications, they are not specifically associated with the combined use of Valproic acid and topiramate in the way that hyperammonemic encephalopathy is.

**4. What treatment approach is effective in acutely managing psychosocial impacts of drug abuse?**

- A. Psychotherapy**
- B. Pharmacotherapy**
- C. Intervention strategies**
- D. Support groups**

Intervention strategies are particularly effective in acutely managing the psychosocial impacts of drug abuse because they focus on immediate and direct support for individuals struggling with substance use disorders. These strategies can include motivational interviewing, crisis intervention, and brief interventions that aim to engage individuals in treatment and address their immediate psychosocial needs. Such strategies are crucial as they can rapidly connect individuals to necessary resources, support networks, and treatment options while also addressing the emotional and social crises that often accompany substance use. This can help reduce the psychological distress connected to drug abuse and facilitate entry into longer-term treatment options. While psychotherapy and support groups are valuable components of a comprehensive treatment plan, they tend to be more effective as part of a longer-term strategy rather than in acute scenarios. Pharmacotherapy may assist with physical symptoms or cravings but does not directly address the immediate psychosocial challenges. Hence, intervention strategies stand out as the most effective approach in the acute management of these psychosocial impacts.

**5. Neonates typically develop seizures due to drug withdrawal within how many hours after birth?**

- A. 12**
- B. 24**
- C. 48**
- D. 72**

Neonates usually begin to exhibit signs of withdrawal, including seizures, within 48 to 72 hours after birth. This time frame is crucial because it aligns with the peak of withdrawal symptoms that can occur in infants who were exposed to substances in utero. The onset of seizures can vary depending on several factors, including the type of substance the mother used, the timing of the last dose, and the individual characteristics of the neonate. In cases of opioid withdrawal, seizures are typically not seen until the later part of the withdrawal period, which can start as soon as 24 hours but often appears more prominently within the 48 to 72-hour window. Recognizing this timing helps healthcare providers monitor at-risk infants closely for neurological symptoms and administer appropriate interventions, such as supportive care and, if necessary, pharmacological treatment for withdrawal. Understanding this timeline is essential for early identification and management of withdrawal symptoms in neonates, contributing to better outcomes for these infants in a clinical setting.

**6. How many questions does the Addiction Severity Index Test consist of?**

- A. 100**
- B. 200**
- C. 300**
- D. 150**

The Addiction Severity Index (ASI) is a widely used assessment tool designed to evaluate the severity of substance use and its impact on various life domains. The ASI typically consists of a structured interview format with questions that cover seven key areas: medical status, employment/support, drug and alcohol use, legal status, family/social status, and psychiatric status. The correct number of questions in the ASI test is understood to be around 200, making it a comprehensive tool that provides a thorough assessment of individuals' addiction severity. This length allows the tool to gather detailed information that can guide treatment planning and interventions tailored to the individual's needs. Given the context of the ASI's design and purpose, the number of questions is intended to ensure that a wide range of factors related to addiction and recovery are covered, making the tool effective for both assessment and ongoing evaluation.

**7. What health risk is commonly associated with patterns of abusive alcohol use?**

- A. Pneumonia
- B. Chronic liver disease**
- C. Rheumatoid arthritis
- D. Asthma

Chronic liver disease is closely associated with patterns of abusive alcohol use due to the direct toxic effects of alcohol on liver cells. When alcohol is consumed excessively over time, it can lead to a range of liver-related health issues. This includes fatty liver disease, alcoholic hepatitis, and ultimately, cirrhosis, which is the advanced scarring of the liver. The liver is crucial for metabolizing and detoxifying various substances, and chronic alcohol consumption impairs its function, leading to serious health complications. Understanding the impact of alcohol on liver health is essential for identifying and managing risks among individuals who engage in abusive patterns of substance use. The other options, such as pneumonia and asthma, are generally not directly linked to alcohol abuse in the same manner as liver disease, and while rheumatoid arthritis can be influenced by lifestyle factors, it is not specifically a direct consequence of alcohol abuse. Therefore, focusing on chronic liver disease highlights the significant health risks associated with excessive alcohol consumption.

**8. Which type of reinforcement is characterized by complimenting a certain behavior every time?**

- A. Continuous reinforcement**
- B. Variable reinforcement
- C. Positive reinforcement
- D. Negative reinforcement

The concept of continuous reinforcement is characterized by the practice of providing a reward or compliment every time a specific behavior occurs. This approach is effective in establishing and strengthening the desired behavior consistently since the individual receives immediate and predictable feedback for their actions. In continuous reinforcement, the reinforcement is delivered consistently, which helps the individual recognize a direct correlation between their behavior and the reward. This can be particularly useful in early stages of learning a new behavior or skill, as it creates a clear and strong association that encourages repetition of the behavior. While positive reinforcement also involves providing a reward, in this case, the focus on every instance of the desired behavior makes continuous reinforcement the more precise term. Other forms of reinforcement, such as variable reinforcement, involve providing rewards intermittently, which can be effective at maintaining behavior over time but does not involve the same consistency as continuous reinforcement. Negative reinforcement, on the other hand, refers to the removal of an unpleasant stimulus when a desired behavior occurs, which is a different mechanism entirely. Thus, continuous reinforcement specifically matches the description of complimenting a certain behavior each time.

**9. What is a common concern when prescribing Haloperidol due to its side effects?**

- A. Weight gain**
- B. Extrapyramidal symptoms**
- C. Hypertension**
- D. Addiction potential**

Haloperidol, an antipsychotic medication, is primarily known for its potential to cause extrapyramidal symptoms (EPS). These are drug-induced movement disorders that can include symptoms such as tremors, rigidity, bradykinesia, and tardive dyskinesia. These side effects result from the medication's action on dopamine receptors in the brain, particularly in the nigrostriatal pathway, which is involved in the regulation of movement. The risk of developing EPS is a well-documented concern among healthcare providers when prescribing Haloperidol, especially at higher doses or with prolonged use. This makes it essential for nurses and healthcare professionals to monitor patients carefully for signs of these symptoms and educate them about the potential side effects. While weight gain, hypertension, and addiction potential can be concerns with various medications, they are not as directly associated with Haloperidol as extrapyramidal symptoms. Therefore, the focus on EPS is critical in the context of its prescription and the management of patients on this medication.

**10. A heroin addict buying a synthetic opioid contaminated with MPTP can develop damage leading to what neurological disease?**

- A. Huntington's disease**
- B. Multiple sclerosis**
- C. Parkinson's disease**
- D. Alzheimer's disease**

The correct answer is Parkinson's disease. This connection arises from the fact that MPTP (1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine) is a neurotoxin that affects the brain in a manner similar to that of Parkinson's disease. When MPTP is metabolized in the body, it produces a byproduct that directly damages dopamine-producing neurons within the substantia nigra region of the brain, which is critical for motor control. Individuals who inadvertently consume drugs laced with MPTP may experience symptoms akin to those of Parkinson's disease, such as tremors, rigidity, and bradykinesia (slowness of movement). The resemblance is so pronounced that MPTP exposure is often studied as a model for Parkinson's disease in research settings. Understanding the link between MPTP and Parkinson's disease emphasizes the dangers associated with synthetic opioids and drugs contaminated with harmful substances. The ramifications of such contamination extend beyond the immediate effects of substance use, highlighting the potential for long-term neurological consequences.

## 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](mailto:hello@examzify.com).**

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

**<https://certifiedaddictionsregisterednurse.examzify.com>**

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