

# Collin College Cardiac Drugs Practice Test (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 of the following is an adverse effect of Epinephrine?**
  - A. Hypoglycemia
  - B. Hypertensive crisis
  - C. Bradyarrhythmia
  - D. Respiratory depression
  
- 2. What physiological effect does Norepinephrine primarily exert?**
  - A. Vasodilation
  - B. Bronchodilation
  - C. Vasoconstriction
  - D. Decreased cardiac output
  
- 3. What type of drug is Nitroglycerin classified as?**
  - A. Antihypertensive
  - B. Vasodilator
  - C. Beta-blocker
  - D. Anticoagulant
  
- 4. Which of the following best describes the action of Lidocaine regarding sympathetic response?**
  - A. Increases sympathetic response
  - B. Blunts sympathetic response
  - C. Has no effect on sympathetic response
  - D. Decreases parasympathetic response
  
- 5. What is the recommended route for administering Adenosine?**
  - A. Intramuscular
  - B. Subcutaneous
  - C. Intravenous
  - D. Inhalation

**6. What is the classification of Adenosine?**

- A. Antibiotic**
- B. Antidysrhythmic**
- C. Anticoagulant**
- D. Analgesic**

**7. What type of drug is Verapamil commonly used for?**

- A. Antihypertensive**
- B. Antibiotic**
- C. Antidepressant**
- D. Antipsychotic**

**8. Which of the following describes the main use of Calcium Gluconate?**

- A. Treating dehydration**
- B. Managing hyperkalemia**
- C. Counteracting hypocalcemia**
- D. Both B and C**

**9. What is one of the primary actions of Atropine?**

- A. Enhances vagal stimulation**
- B. Blocks parasympathetic stimulation of vagal impulses**
- C. Increases vagal tone**
- D. Decreases heart rate**

**10. Which of the following routes can Labetalol be administered?**

- A. IM only**
- B. IV/IO and PO**
- C. Subcutaneous**
- D. Inhalation**

## **Answers**

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

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## **Explanations**

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**1. Which of the following is an adverse effect of Epinephrine?**

- A. Hypoglycemia
- B. Hypertensive crisis**
- C. Bradyarrhythmia
- D. Respiratory depression

Epinephrine, a sympathomimetic agent, is known for its potent vasoconstrictive and stimulatory effects on the heart and lungs. One significant adverse effect of epinephrine is a hypertensive crisis. This occurs due to its action of increasing cardiac output and peripheral vascular resistance, which can lead to significant elevations in blood pressure. In clinical scenarios, particularly during anaphylactic reactions or cardiac arrest treatments where epinephrine is used purposefully, the drug can cause the blood vessels to constrict, leading to increased systemic vascular resistance. This response can result in a sudden and severe increase in blood pressure, manifesting as a hypertensive crisis. Monitoring blood pressure is critical during epinephrine administration to prevent the complications associated with severely elevated blood pressure levels. Other options like hypoglycemia, bradyarrhythmia, and respiratory depression are not typical adverse effects associated with epinephrine administration. Instead, epinephrine can cause increases in blood glucose levels, tachyarrhythmias, and respiratory stimulation, making hypertensive crisis the most relevant and dangerous risk associated with this drug.

**2. What physiological effect does Norepinephrine primarily exert?**

- A. Vasodilation
- B. Bronchodilation
- C. Vasoconstriction**
- D. Decreased cardiac output

Norepinephrine primarily exerts vasoconstriction, which is a key physiological effect of its action. This catecholamine is often released during stress or low blood pressure situations and plays a critical role in the body's fight-or-flight response. When norepinephrine binds to alpha-adrenergic receptors on the smooth muscle lining of blood vessels, it causes these muscles to contract, leading to narrowing of the blood vessels (vasoconstriction). This results in an increase in systemic vascular resistance and overall blood pressure, aiding in the maintenance of adequate blood flow to vital organs during times of physiological stress. In contrast, the effects associated with vasodilation and decreased cardiac output would involve mechanisms that reduce blood pressure or increase the lumen size of blood vessels, which is not in line with how norepinephrine acts. Similarly, bronchodilation is associated with the action of other catecholamines like epinephrine, reflecting a different aspect of adrenergic response that primarily involves beta-2 adrenergic receptors. Thus, the primary effect of norepinephrine's action aligns strongly with vasoconstriction, making it the correct choice in this context.

### 3. What type of drug is Nitroglycerin classified as?

- A. Antihypertensive
- B. Vasodilator**
- C. Beta-blocker
- D. Anticoagulant

Nitroglycerin is classified as a vasodilator because it works by relaxing and widening blood vessels, which reduces the workload on the heart and improves blood flow. This mechanism is particularly beneficial in treating conditions such as angina pectoris, where the heart muscle does not receive enough oxygen due to narrowed coronary arteries. When nitroglycerin is administered, it helps alleviate chest pain by decreasing the amount of blood returning to the heart, thereby lessening myocardial oxygen demand. This action specifically highlights its primary role in cardiovascular therapy and distinguishes it from other drug classes. In contrast, antihypertensives are designed to lower blood pressure, beta-blockers primarily work by reducing heart rate and the heart's workload, and anticoagulants are used to prevent the formation of blood clots. Each of these classes has distinct pharmacological actions that do not encompass the vasodilatory effects of nitroglycerin.

### 4. Which of the following best describes the action of Lidocaine regarding sympathetic response?

- A. Increases sympathetic response
- B. Blunts sympathetic response**
- C. Has no effect on sympathetic response
- D. Decreases parasympathetic response

Lidocaine is primarily known as a local anesthetic and an antiarrhythmic agent, particularly in managing ventricular arrhythmias. When considering its action in relation to the sympathetic response, it is important to recognize that Lidocaine has a stabilizing effect on the cardiac membrane which can inhibit excitability and conduction in cardiac tissues. Blunting the sympathetic response means that Lidocaine helps to reduce the heightened sympathetic tone, often observed in conditions such as pain or stress, by stabilizing cardiac activity and preventing excessive stimulation. This attribute is especially beneficial in clinical scenarios such as ventricular tachycardia or cardiac arrest, where excessive sympathetic activity can be detrimental. Therefore, Lidocaine helps create a more stable cardiovascular environment, thus reducing the overall sympathetic drive during treatment. This blunting of sympathetic response can also contribute to the overall effect of reducing cardiac workload and oxygen demand, which is crucial in patients experiencing arrhythmias. It allows for calmer cardiac rhythmic activity, which is vital in resuscitative settings or during surgery. Thus, the action of Lidocaine in blunting sympathetic response is significant in its use for managing certain cardiac conditions.

## 5. What is the recommended route for administering Adenosine?

- A. Intramuscular
- B. Subcutaneous
- C. Intravenous**
- D. Inhalation

Adenosine is typically administered via the intravenous route because this method allows for rapid delivery of the drug into the bloodstream, ensuring a swift therapeutic effect, especially in emergency situations such as supraventricular tachycardia (SVT). When given intravenously, adenosine acts quickly to interrupt abnormal electrical conduction pathways in the heart, making it highly effective for converting certain types of tachyarrhythmias back to a normal sinus rhythm. This rapid action is critical in acute settings where the patient may be experiencing significant symptoms related to rapid heart rates. In contrast, other routes such as intramuscular or subcutaneous would be less effective due to slower absorption rates and delayed onset of action. Inhalation is also not utilized for adenosine, as it would not allow for the necessary pharmacokinetics required for its effects on heart rhythm control. Therefore, intravenous administration is the optimal and recommended route for delivering adenosine.

## 6. What is the classification of Adenosine?

- A. Antibiotic
- B. Antidysrhythmic**
- C. Anticoagulant
- D. Analgesic

Adenosine is classified as an antidysrhythmic agent primarily due to its role in the management of specific types of supraventricular tachycardia (SVT). It works by slowing down the conduction through the atrioventricular (AV) node, which helps restore normal heart rhythm. This mechanism allows it to effectively terminate certain rapid heart rhythms that originate above the ventricles. By acting on the cardiac conduction system, adenosine can quickly restore sinus rhythm, making it a valuable medication in acute situations where rapid intervention is necessary. This classification underscores its critical role in treating cardiac dysrhythmias rather than serving as an antibiotic, anticoagulant, or analgesic, which have entirely different therapeutic indications and mechanisms of action.

## 7. What type of drug is Verapamil commonly used for?

- A. Antihypertensive**
- B. Antibiotic**
- C. Antidepressant**
- D. Antipsychotic**

Verapamil is primarily classified as an antihypertensive drug, specifically a calcium channel blocker. It works by inhibiting the influx of calcium ions into vascular smooth muscle and the myocardium (heart muscle), leading to relaxation of the blood vessels and a decrease in heart rate. This mechanism results in reduced blood pressure, making Verapamil effective for treating hypertension. Additionally, Verapamil is utilized in managing certain types of arrhythmias (irregular heartbeats) and angina (chest pain due to reduced blood flow to the heart). Its role in providing cardiovascular benefit through lowering blood pressure and improving heart function cements its primary classification as an antihypertensive drug. Other categories like antibiotics, antidepressants, or antipsychotics do not encompass the actions or uses of Verapamil, as they serve different therapeutic purposes not related to the regulation of cardiovascular health or blood pressure.

## 8. Which of the following describes the main use of Calcium Gluconate?

- A. Treating dehydration**
- B. Managing hyperkalemia**
- C. Counteracting hypocalcemia**
- D. Both B and C**

Calcium Gluconate is primarily used for two significant medical purposes: managing hyperkalemia and counteracting hypocalcemia. Hyperkalemia, or elevated potassium levels in the blood, can lead to serious cardiac complications. Calcium Gluconate helps stabilize the cardiac membrane, reducing the risk of arrhythmias and other heart-related issues that may arise due to high potassium levels. Hypocalcemia refers to low calcium levels in the blood, which can result in muscle spasms, seizures, and other neurological issues. Calcium Gluconate effectively raises calcium levels, providing the necessary ions to alleviate these symptoms and restore normal physiological functions. The correct answer encompasses both these uses, showcasing Calcium Gluconate's dual role in clinical settings for managing specific electrolyte imbalances, which is crucial for patient safety and health recovery.

## 9. What is one of the primary actions of Atropine?

- A. Enhances vagal stimulation
- B. Blocks parasympathetic stimulation of vagal impulses**
- C. Increases vagal tone
- D. Decreases heart rate

Atropine primarily acts as an anticholinergic agent, which means it blocks the action of acetylcholine at muscarinic receptors. This mechanism inhibits the parasympathetic nervous system's influence, particularly its vagal stimulation on the heart. By blocking parasympathetic stimulation, Atropine effectively reduces the vagal influence, leading to an increase in heart rate. This property is crucial in clinical situations such as bradycardia, where increased heart rate is often necessary for maintaining adequate cardiac output. In scenarios where enhancing vagal stimulation or increasing vagal tone is required, other agents would be more appropriate. Atropine's role is specific to blocking these actions, thus facilitating an increase in heart rate instead of supporting the body's intrinsic parasympathetic mechanisms.

## 10. Which of the following routes can Labetalol be administered?

- A. IM only
- B. IV/IO and PO**
- C. Subcutaneous
- D. Inhalation

Labetalol is a medication that can be administered through multiple routes, specifically intravenous (IV), intraosseous (IO), and oral (PO). This flexibility in administration is beneficial in various clinical settings. The intravenous and intraosseous routes allow for rapid onset of action, which is especially useful in acute situations requiring quick blood pressure control, such as hypertensive emergencies. The oral route provides an alternative for ongoing management of hypertension in a less acute setting, allowing for patient self-administration at home or in outpatient situations. The other routes mentioned—intramuscular (IM), subcutaneous, and inhalation—are not viable options for Labetalol administration, as they do not provide the same effectiveness or desired pharmacokinetic profile for this specific medication. IM and subcutaneous routes are generally used for other medications, while inhalation is not an appropriate method for delivering Labetalol's therapeutic effects.

# 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://collincardiacdrugs.examzify.com>**

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

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