

Drug Recognition Expert 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. What is the expected pupil size during a CNS Depressant evaluation?**
 - A. Dilated**
 - B. Normal**
 - C. Constricted**
 - D. Variable**
- 2. What is Cheyne-Stokes respiration characterized by?**
 - A. Consistent shallow breathing**
 - B. Abnormal pattern of breathlessness and deep, fast breathing**
 - C. Rapid heartbeat and shallow gasping**
 - D. Regulated breathing with occasional pauses**
- 3. What describes gait ataxia?**
 - A. A rapid, focused walk**
 - B. A steady and coordinated movement**
 - C. A rhythmic and musical gait**
 - D. An unsteady, staggering gait**
- 4. Inhalants can produce effects similar to which of the following substances?**
 - A. Stimulants**
 - B. Hallucinogens**
 - C. Depressants**
 - D. Analgesics**
- 5. What is the typical size of a bottle of beer?**
 - A. 8 ounces**
 - B. 12 ounces**
 - C. 16 ounces**
 - D. 24 ounces**
- 6. Which of the following is NOT one of the CNS depressants?**
 - A. Barbiturates**
 - B. Cocaine**
 - C. Anti-anxiety tranquilizers**
 - D. Anti-psychotic**

- 7. What describes dysarthria?**
- A. Shortness of breath**
 - B. A disorder of mood**
 - C. Slurred speech**
 - D. An unsteady, staggering gait**
- 8. The technical term for an excessively rapid heart rate is called what?**
- A. Bradycardia**
 - B. Tachycardia**
 - C. Arrhythmia**
 - D. Hypertension**
- 9. Which drug is noted as not being listed in the Physician's Desk Reference (PDR)?**
- A. Cocaine**
 - B. Alcohol**
 - C. Heroin**
 - D. Marijuana**
- 10. What is the name of the chemical process by which beverage alcohol is produced naturally?**
- A. Distillation**
 - B. Fermentation**
 - C. Oxidation**
 - D. Condensation**

Answers

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

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Explanations

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1. What is the expected pupil size during a CNS Depressant evaluation?

- A. Dilated**
- B. Normal**
- C. Constricted**
- D. Variable**

During a CNS Depressant evaluation, the expected pupil size is generally normal. Central nervous system depressants, such as alcohol, benzodiazepines, and barbiturates, typically do not cause significant changes in pupil size the way stimulants or hallucinogens might. Instead, they tend to keep pupil size within the normal range, reflecting the calming and sedative effects these substances have on the body. Understanding the physiological effects of CNS depressants is crucial for accurately assessing the influence of such substances during evaluations. Changes in pupil size can be indicative of different drug categories, so recognizing that normal pupil size is expected with CNS depressants allows the evaluator to narrow down the potential substances at play in a given situation. Other answers reflect potential changes associated with other drug classes, such as constriction commonly seen in opioids or dilation linked to stimulants, but in the context of CNS depressants, a normal pupil size is the appropriate response.

2. What is Cheyne-Stokes respiration characterized by?

- A. Consistent shallow breathing**
- B. Abnormal pattern of breathlessness and deep, fast breathing**
- C. Rapid heartbeat and shallow gasping**
- D. Regulated breathing with occasional pauses**

Cheyne-Stokes respiration is characterized by a specific pattern where an individual experiences cycles of deep, rapid breathing followed by periods of shallow breathing or apnea. This pattern typically consists of an initial phase of increasing depth and frequency of breaths, leading to hyperventilation, followed by a decline in breathing effort and depth, ultimately resulting in a temporary halt in breathing. This alternating pattern is often indicative of issues related to the brain or significant respiratory distress and can be observed in various conditions, such as congestive heart failure, stroke, or head injury. The distinctive cyclical nature of deep, fast breathing combined with breathlessness distinguishes this pattern from other types of respiratory issues. The other options do not accurately capture the unique characteristics of Cheyne-Stokes respiration, as they either describe different breathing patterns or fail to reflect the alternating cycles that define this type of respiration.

3. What describes gait ataxia?

- A. A rapid, focused walk
- B. A steady and coordinated movement
- C. A rhythmic and musical gait
- D. An unsteady, staggering gait**

Gait ataxia refers to a lack of muscle coordination during voluntary movements, particularly regarding walking. The characteristic feature of ataxic gait is that it presents as an unsteady and staggering movement. This type of gait is often seen in individuals who have neurological disorders, intoxication, or other conditions that affect their ability to control their limbs effectively. Individuals with gait ataxia may appear to have difficulty maintaining balance and can sway or stumble, which enhances the risk of falls. The other choices depict movements that would not be associated with gait ataxia. A rapid, focused walk suggests intention and control, which contrasts with the unsteadiness of ataxia. A steady and coordinated movement is the opposite of what ataxia indicates, as the hallmark of ataxia is the lack of coordination. A rhythmic and musical gait is also not linked to ataxia, as it implies a certain fluidity and regularity that ataxic movements do not possess. Thus, the defining characteristic of an unsteady, staggering gait accurately describes gait ataxia.

4. Inhalants can produce effects similar to which of the following substances?

- A. Stimulants
- B. Hallucinogens
- C. Depressants**
- D. Analgesics

Inhalants are substances that produce chemical vapors which can be inhaled to induce psychoactive effects. The effects of inhalants often resemble those of depressants, as they generally lead to a decrease in brain activity, resulting in sedation, relaxation, and a feeling of euphoria. When inhaled, these substances can slow down bodily functions, impair motor coordination, and cause drowsiness or light-headedness, akin to the effects produced by alcohol or other depressants. The similarity in effects arises because both inhalants and depressants act on the central nervous system, affecting neurotransmitter activity and leading to a calming effect. This is why, among the provided options, the effects of inhalants most closely align with those of depressants. In contrast, stimulants increase energy and alertness, hallucinogens alter perception and can cause hallucinations, and analgesics primarily relieve pain without necessarily producing sedative effects. Therefore, the classification of inhalants as producing effects similar to depressants is accurate based on their physiological and psychological impact on the user.

5. What is the typical size of a bottle of beer?

- A. 8 ounces
- B. 12 ounces**
- C. 16 ounces
- D. 24 ounces

The typical size of a bottle of beer is 12 ounces, which is the standard for most commercially available beer bottles in various markets. This size has become the norm for breweries and is widely recognized by consumers. The 12-ounce bottle allows for easy handling, portion control, and aligns well with serving sizes in social and dining contexts. Though there are larger bottles available, such as 16-ounce and 24-ounce options, and smaller bottles like the 8-ounce, the 12-ounce is predominant and considered typical for a single serving of beer in most settings.

6. Which of the following is NOT one of the CNS depressants?

- A. Barbiturates
- B. Cocaine**
- C. Anti-anxiety tranquilizers
- D. Anti-psychotic

Cocaine is classified as a stimulant, not a CNS depressant. CNS depressants are substances that reduce the activity of the central nervous system, leading to sedation, relaxation, and decreased inhibition. Barbiturates, anti-anxiety tranquilizers, and anti-psychotics all have CNS depressant effects. Barbiturates are well-known for their ability to depress the central nervous system, often used historically as sedatives or sleep aids. Anti-anxiety tranquilizers, such as benzodiazepines, also work by producing calming effects, reducing anxiety, and promoting sleep. Anti-psychotic medications can have sedative properties, especially those that influence neurotransmitters related to anxiety and mood. In contrast, cocaine increases alertness, energy, and cognitive function by stimulating the release of dopamine and other neurotransmitters, which causes a completely different effect on the central nervous system compared to depressants. Understanding these classifications helps in recognizing the physiological effects of different substances on the body.

7. What describes dysarthria?

- A. Shortness of breath
- B. A disorder of mood
- C. Slurred speech**
- D. An unsteady, staggering gait

Dysarthria is a motor speech disorder resulting from neurological injury that affects the muscles used in speech production. It is characterized by slurred, slow, and difficult speech due to weakness, paralysis, or incoordination of the speech muscles. People with dysarthria may have varying levels of difficulty in articulating words, leading to speech that can be difficult for others to understand. This condition can result from a variety of causes, including brain injury, stroke, or neurological diseases, and it directly impacts the clarity of speech. The other options refer to symptoms associated with different medical conditions: shortness of breath relates to respiratory issues, a disorder of mood pertains to psychological conditions like depression or anxiety, and an unsteady or staggering gait is indicative of balance or coordination problems often associated with neurological or vestibular disorders. Thus, while all these options represent genuine health concerns, they do not describe dysarthria, which focuses specifically on speech difficulties.

8. The technical term for an excessively rapid heart rate is called what?

- A. Bradycardia
- B. Tachycardia**
- C. Arrhythmia
- D. Hypertension

Tachycardia refers specifically to an excessively rapid heart rate, typically defined as a resting heart rate of over 100 beats per minute in adults. This condition can result from various factors, such as stress, fever, anemia, or the effects of certain drugs, and may indicate underlying health issues requiring attention. Bradycardia, in contrast, describes a slow heart rate, usually defined as fewer than 60 beats per minute. Arrhythmia refers to irregularities in the heart's rhythm, which can encompass both fast and slow heart rates. Hypertension deals with high blood pressure, rather than heart rate. Therefore, tachycardia is the accurate term for an excessively rapid heart rate.

9. Which drug is noted as not being listed in the Physician's Desk Reference (PDR)?

A. Cocaine

B. Alcohol

C. Heroin

D. Marijuana

Heroin is not listed in the Physician's Desk Reference (PDR) because it is classified as a Schedule I controlled substance and is not approved for medical use in the United States. The PDR contains information about medications that are legally prescribed and used in therapeutic contexts. Heroin is primarily recognized for its illicit use and associated risks rather than any medical application, which is why healthcare providers do not reference it in standard medical guides like the PDR. In contrast, cocaine, alcohol, and marijuana have recognized therapeutic uses or historical medical contexts in the literature, which leads to their inclusion in medical references like the PDR. Cocaine has medical applications as a local anesthetic in specific surgical procedures, alcohol is a common substance with both medicinal and recreational uses, and marijuana, which has gained legal status in many jurisdictions, can be prescribed for certain conditions. These factors distinguish them from heroin in terms of medical documentation and acceptance.

10. What is the name of the chemical process by which beverage alcohol is produced naturally?

A. Distillation

B. Fermentation

C. Oxidation

D. Condensation

The process by which beverage alcohol is produced naturally is known as fermentation. During fermentation, yeasts consume sugars and convert them into alcohol and carbon dioxide. This process typically occurs in the absence of oxygen and can happen naturally with fruit juices or can be cultivated in an environment where controlled fermentation takes place. Fermentation is integral to the production of various alcoholic beverages like beer, wine, and spirits, serving as the foundational method for transforming raw materials into alcohol. The sugars present in grains, fruits, or other substrates are the essential components that yeasts metabolize to produce ethanol, the alcohol found in beverages. In contrast, distillation is a method used to purify or concentrate liquids, including alcohol, but it is not the initial process that creates alcoholic content. Oxidation refers to a chemical reaction that involves the loss of electrons, prominent in various biochemical processes, but not specifically in the creation of alcohol. Condensation, while related to the change of state from gas to liquid, does not pertain to the biological transformation of sugars into alcohol. Thus, fermentation is the key natural process responsible for the production of beverage alcohol.

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:

<https://drugrecognitionexpert.examzify.com>

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