

# Effects of Alcohol and Drug Abuse: Body Systems, Risks, and Prevention Practice Test (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

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- 1. What is fetal alcohol spectrum disorder and name two potential physical or neurodevelopmental features.**
  - A. A temporary condition resolved after birth; features include improved memory**
  - B. A range of effects from prenatal alcohol exposure; features include facial abnormalities (short palpebral fissures) and neurodevelopmental deficits (cognitive impairment, ADHD-like symptoms)**
  - C. A disease caused by postnatal alcohol exposure; features include obesity and diabetes**
  - D. A disorder unrelated to alcohol; features include acne and nearsightedness**
  
- 2. How does alcohol use influence menstrual regularity and fertility?**
  - A. Disrupt ovulation, irregular cycles; heavy use linked to reduced fertility; pregnancy risks.**
  - B. Improves ovulation and fertility.**
  - C. No effect on menstrual cycles.**
  - D. Only affects male fertility.**
  
- 3. What is the purpose of a brief intervention in primary care for risky drinking?**
  - A. To diagnose substance use disorder**
  - B. To motivate the patient to reduce consumption and connect with resources**
  - C. To prescribe medication only**
  - D. To conduct extensive psychotherapy over months**
  
- 4. What happens when the brain's reward pathway is flooded with dopamine?**
  - A. No effect**
  - B. Cravings decrease**
  - C. Immediate recovery of addiction**
  - D. Intense cravings for the drug and dull the brain's reactions to natural dopamine**

- 5. How should naloxone be administered in an emergency when an opioid overdose is suspected?**
- A. Administer oral naloxone and wait for emergency services.**
  - B. Administer intramuscularly or via nasal spray and call emergency services.**
  - C. Wait for EMS to arrive before giving naloxone.**
  - D. Naloxone should not be used outside a hospital setting.**
- 6. Prenatal exposure to alcohol is associated with which fetal outcomes?**
- A. Fetal alcohol spectrum disorders and growth impairment**
  - B. Enhanced cognitive development**
  - C. No effect on fetal development**
  - D. Only behavioral changes with no physical impact**
- 7. What are some common side effects of drugs?**
- A. Hair growth**
  - B. Weight loss**
  - C. Nausea, dizziness, and drowsiness**
  - D. Improved memory**
- 8. Where is a brief intervention for risky drinking most commonly implemented?**
- A. Primary care settings**
  - B. Inpatient detox centers**
  - C. Emergency departments only**
  - D. Campus health centers only**
- 9. Explain the rationale for universal prevention programs in schools and communities.**
- A. To address widespread risk factors and promote protective factors across populations, reducing initial experimentation.**
  - B. To focus only on high-risk individuals.**
  - C. To replace existing family-based prevention efforts.**
  - D. To penalize youth who experiment with substances.**

**10. What is the AUDIT score threshold that indicates risky drinking requiring brief intervention in adults?**

- A. A score of 4 or higher suggests hazardous or harmful drinking.**
- B. A score of 8 or higher suggests hazardous or harmful drinking.**
- C. A score of 12 or higher suggests hazardous or harmful drinking.**
- D. A score of 15 or higher suggests hazardous or harmful drinking.**

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## Answers

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

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## **Explanations**

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1. What is fetal alcohol spectrum disorder and name two potential physical or neurodevelopmental features.
  - A. A temporary condition resolved after birth; features include improved memory
  - B. A range of effects from prenatal alcohol exposure; features include facial abnormalities (short palpebral fissures) and neurodevelopmental deficits (cognitive impairment, ADHD-like symptoms)**
  - C. A disease caused by postnatal alcohol exposure; features include obesity and diabetes
  - D. A disorder unrelated to alcohol; features include acne and nearsightedness

Fetal Alcohol Spectrum Disorder is a range of effects that can result from alcohol exposure before birth. This condition arises because alcohol is a teratogen that can disrupt fetal development in multiple ways, and the severity depends on how much and when during pregnancy the exposure occurs. A typical pair of features you might see includes facial abnormalities, such as short palpebral fissures, and neurodevelopmental deficits, like cognitive impairment or ADHD-like symptoms. These reflect the brain and facial development disruptions caused by prenatal alcohol exposure. It isn't a condition that resolves after birth, nor is it caused by postnatal exposure, and it wouldn't be characterized by unrelated issues like obesity/diabetes or acne/nearsightedness.

2. How does alcohol use influence menstrual regularity and fertility?
  - A. Disrupt ovulation, irregular cycles; heavy use linked to reduced fertility; pregnancy risks.**
  - B. Improves ovulation and fertility.
  - C. No effect on menstrual cycles.
  - D. Only affects male fertility.

Alcohol can interfere with the hormonal system that controls the menstrual cycle. The hypothalamus and pituitary release hormones like FSH and LH to stimulate egg development and trigger ovulation. Alcohol can alter these hormone levels and disrupt the LH surge, which can lead to skipped or irregular ovulation and thus irregular cycles. With heavy, long-term use, the disruption tends to be stronger, increasing the likelihood of reduced fertility or a longer time to conceive. There are also risks to a pregnancy if conception occurs, including miscarriages and fetal effects from alcohol exposure. So the correct idea is that alcohol disrupts ovulation and causes irregular cycles, with heavy use linked to lower fertility and added pregnancy risks. The other statements don't fit because they downplay or misrepresent alcohol's impact on the female reproductive system.

**3. What is the purpose of a brief intervention in primary care for risky drinking?**

**A. To diagnose substance use disorder**

**B. To motivate the patient to reduce consumption and connect with resources**

**C. To prescribe medication only**

**D. To conduct extensive psychotherapy over months**

Brief intervention in primary care is a short, focused conversation that helps a patient recognize the personal risks of risky drinking, boosts motivation to change, and connects them with resources or treatment options if needed. The aim is to prompt change without diagnosing a substance use disorder or providing lengthy therapy during a single visit. It uses clear, personalized feedback about drinking, concise advice to reduce intake, and helps the patient set a realistic plan with follow-up or referrals. If more intensive treatment or medications are appropriate, those would be addressed separately, but the primary purpose here is to motivate change and link to appropriate care.

**4. What happens when the brain's reward pathway is flooded with dopamine?**

**A. No effect**

**B. Cravings decrease**

**C. Immediate recovery of addiction**

**D. Intense cravings for the drug and dull the brain's reactions to natural dopamine**

When dopamine floods the brain's reward system, the brain adapts to that surge by reducing the sensitivity of the reward circuits. Receptors become less responsive and signaling becomes less efficient, so everyday experiences and natural dopamine releases feel less rewarding. This shift makes the drug's effects feel necessary to regain the high, driving intense cravings, while reducing the brain's reactions to natural rewards. In short, the flood fosters strong drug cravings and dulls responsiveness to natural dopamine.

5. How should naloxone be administered in an emergency when an opioid overdose is suspected?
- A. Administer oral naloxone and wait for emergency services.
  - B. Administer intramuscularly or via nasal spray and call emergency services.**
  - C. Wait for EMS to arrive before giving naloxone.
  - D. Naloxone should not be used outside a hospital setting.

Naloxone works by rapidly blocking opioid receptors, reversing life-threatening breathing problems in an overdose. In an emergency, give the medicine using the quickest, simplest route available—either intramuscular injection or a nasal spray—and then call emergency services right away. Oral naloxone isn't effective quickly enough in an overdose because it isn't absorbed well and acts too slowly to reverse dangerous symptoms. Administering it promptly can restore breathing within minutes, while the person is transported to receive ongoing care and possible additional doses. Because the overdose effects can return as the naloxone wears off, medical monitoring is important, so don't delay calling for help after giving the dose. Naloxone is intended for use by bystanders in non-hospital settings to save lives.

6. Prenatal exposure to alcohol is associated with which fetal outcomes?
- A. Fetal alcohol spectrum disorders and growth impairment**
  - B. Enhanced cognitive development
  - C. No effect on fetal development
  - D. Only behavioral changes with no physical impact

Alcohol acts as a teratogen, crossing the placenta and directly affecting fetal development. Prenatal exposure disrupts brain growth and overall growth, which can lead to fetal alcohol spectrum disorders. FASD includes a range of outcomes from the more visible fetal alcohol syndrome with growth deficiency and facial features to other neurodevelopmental problems, plus possible ongoing behavioral and cognitive effects. That combination of physical growth issues and neurodevelopmental impact is why this option is the best choice. The other statements aren't accurate: alcohol exposure does not enhance cognitive development, it can and often does affect development, and there can be both physical and behavioral effects rather than behavioral changes with no physical impact. Preventing these outcomes centers on avoiding alcohol during pregnancy.

## 7. What are some common side effects of drugs?

- A. Hair growth
- B. Weight loss
- C. Nausea, dizziness, and drowsiness**
- D. Improved memory

When a drug is taken, it aims to produce a therapeutic effect, but it can also affect other parts of the body. These unintended actions are side effects. Nausea, dizziness, and drowsiness are among the most common because they involve the body's central nervous system and digestive system, which are frequently influenced by many medicines. Nausea can arise from irritation of the stomach or signals reaching the brain's vomiting center; dizziness can occur if the drug lowers blood pressure or affects balance pathways in the inner ear; drowsiness happens when the drug depresses CNS activity or has sedating effects. These broad, non-specific actions explain why this trio is a typical set of side effects across diverse drugs. Hair growth isn't a typical side effect for most medicines, though some specific drugs can affect hair. Weight loss can occur with certain drugs but isn't a universal side effect. Improved memory is not a common or expected side effect of medications.

## 8. Where is a brief intervention for risky drinking most commonly implemented?

- A. Primary care settings**
- B. Inpatient detox centers
- C. Emergency departments only
- D. Campus health centers only

The main idea is where brief, motivational interventions for risky drinking are most often put into practice. These interventions are short, structured conversations designed to motivate people to reduce their alcohol use and are designed to fit into routine healthcare visits. Primary care settings are the most natural home for this approach because they reach a wide and general patient population on a regular schedule. During routine checkups or follow-ups, clinicians can quickly screen for risky drinking and deliver a concise counseling session (often 5-15 minutes). This makes it feasible to implement widely and sustain over time, with the option to refer for more help if needed. Inpatient detox centers are focused on withdrawal management and longer-term treatment, not routine screening for the broader population. Emergency departments handle acute visits and high patient throughput, so while brief interventions can occur there, they are not the most common setting overall. Campus health centers serve students, offering opportunities for brief interventions within that population, but again, not the widest-reaching setting across all adults.

**9. Explain the rationale for universal prevention programs in schools and communities.**

**A. To address widespread risk factors and promote protective factors across populations, reducing initial experimentation.**

**B. To focus only on high-risk individuals.**

**C. To replace existing family-based prevention efforts.**

**D. To penalize youth who experiment with substances.**

Universal prevention programs aim to reduce risk factors and promote protective factors across populations, particularly in schools and communities. By addressing the factors that many youths share—like peer influences, school connectedness, family communication, and access to engaging activities—these programs lower the odds that youth will experiment with substances in the first place. They strengthen protective factors such as self-efficacy, decision-making skills, and supportive relationships, creating an overall environment that supports healthy choices for all students. This broad approach helps prevent problems before they start and reduces disparities by offering prevention resources to everyone, while complementing more targeted or family-based efforts rather than replacing them. Approaches that focus only on high-risk individuals or that penalize experimentation don't create the same wide-reaching protective climate, so they aren't as effective for universal prevention.

**10. What is the AUDIT score threshold that indicates risky drinking requiring brief intervention in adults?**

**A. A score of 4 or higher suggests hazardous or harmful drinking.**

**B. A score of 8 or higher suggests hazardous or harmful drinking.**

**C. A score of 12 or higher suggests hazardous or harmful drinking.**

**D. A score of 15 or higher suggests hazardous or harmful drinking.**

The main point here is how the AUDIT screening uses a defined cut-off score to flag risky drinking in adults. The total score from the questionnaire represents both how often and how much someone drinks, plus any related problems they've experienced. When that total reaches the standard screening threshold, it signals hazardous or harmful drinking and indicates that a brief intervention is appropriate to help reduce risk. This threshold is chosen because it balances catching those at risk (sensitivity) with not over-identifying low-risk individuals (specificity). If you used a higher threshold, some people who could benefit from early advice might be missed; if you used a lower threshold, too many people without meaningful risk could be flagged. The correct option reflects that standard cut-off point that triggers brief intervention.

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

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

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