

# National Certified Addiction Counselor, Level I (NCAC I) 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,**

**Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.**

**ALL RIGHTS RESERVED.**

**No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.**

**Notice: Examzify makes every reasonable effort to obtain from reliable sources accurate, complete, and timely information about this product.**

**SAMPLE**

# Table of Contents

<b>Copyright</b> .....	<b>1</b>
<b>Table of Contents</b> .....	<b>2</b>
<b>Introduction</b> .....	<b>3</b>
<b>How to Use This Guide</b> .....	<b>4</b>
<b>Questions</b> .....	<b>6</b>
<b>Answers</b> .....	<b>9</b>
<b>Explanations</b> .....	<b>11</b>
<b>Next Steps</b> .....	<b>17</b>

SAMPLE

# 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!**

**SAMPLE**

## **Questions**

SAMPLE

- 1. Which of the following is a potential long-term effect of opioid overuse?**
  - A. Decreased sensitivity**
  - B. Hyperalgesia**
  - C. Improved mood**
  - D. Reduced pain perception**
- 2. Which attribute of benzodiazepines contributes to their longer-lasting effects?**
  - A. Their rapid metabolism**
  - B. The unique psychoactive effects of metabolites**
  - C. Their combination with other drugs**
  - D. Their dosage form**
- 3. Which of the following is NOT a distinction between benzodiazepines and barbiturates?**
  - A. Benzodiazepines have a faster onset of effects**
  - B. Benzodiazepines have a longer duration of action**
  - C. Benzodiazepines are less likely to be abused**
  - D. Benzodiazepines are more toxic**
- 4. Which schedule represents substances that may lead to limited dependence and have accepted medical uses?**
  - A. Schedule III**
  - B. Schedule IV**
  - C. Schedule V**
  - D. Schedule I**
- 5. Which of the following describes hashish oil?**
  - A. A concentrated oil derived from hashish**
  - B. THC oil extracted directly from the cannabis plant**
  - C. An oil that contains no THC**
  - D. A non-psychoactive oil used for cooking**

**6. What was the historical medical use of PCP?**

- A. Anesthetic
- B. Antidepressant
- C. Analgesic
- D. Anticonvulsant

**7. How many stages of alcohol withdrawal are typically recognized?**

- A. 2
- B. 3
- C. 4
- D. 5

**8. What is a characteristic of the middle stage of alcohol dependence?**

- A. Must drink to function
- B. Lack of preoccupation with drinking
- C. Temporary sobriety
- D. Feelings of guilt

**9. What result does acetaldehyde have when produced in large amounts?**

- A. It acts as a stimulant
- B. It serves as energy
- C. It is poisonous
- D. It enhances mood

**10. Between short-acting and long-acting barbiturates, which type is more likely to be prescribed for detox?**

- A. Short-acting barbiturates
- B. Long-acting barbiturates
- C. Both are equally effective
- D. Neither are prescribed for detox

## **Answers**

SAMPLE

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

SAMPLE

## **Explanations**

SAMPLE

**1. Which of the following is a potential long-term effect of opioid overuse?**

- A. Decreased sensitivity**
- B. Hyperalgesia**
- C. Improved mood**
- D. Reduced pain perception**

The selection of hyperalgesia as the correct answer relates to the phenomenon where an individual becomes more sensitive to pain as a result of prolonged opioid use. This paradoxical outcome occurs because the body's pain regulation mechanisms can become dysregulated after extended exposure to opioids. Instead of reducing pain, the overuse of opioids can lead to an increased sensitivity, meaning that painful stimuli which might not have been perceived as intensely before can now cause greater discomfort or pain. This underscores the complexity of opioid medications, where, despite their intended purpose of pain relief, their misuse or overuse can lead to unintended and challenging complications, such as hyperalgesia. The other options reflect effects that are not aligned with the well-documented outcomes of opioid overuse. Decreased sensitivity would imply a reduction in pain perception, which generally is not a long-term effect associated with opioids. Improved mood can occur with some short-term relief from pain, but it is not a guaranteed long-term effect and may diminish with tolerance to the medications. Reduced pain perception typically serves as the primary desired outcome of opioid therapy but does not represent the potential long-term complications that can arise from overuse.

**2. Which attribute of benzodiazepines contributes to their longer-lasting effects?**

- A. Their rapid metabolism**
- B. The unique psychoactive effects of metabolites**
- C. Their combination with other drugs**
- D. Their dosage form**

The unique psychoactive effects of metabolites are a key factor contributing to the longer-lasting effects of benzodiazepines. When benzodiazepines are metabolized in the liver, they can be converted into active metabolites that retain psychoactive properties. These metabolites can have sedative, anxiolytic, or muscle relaxant effects, and because they circulate in the body after the parent drug has been eliminated, they extend the overall duration of action. This characteristic explains why some benzodiazepines, even after the original compound has been processed, can continue to exert effects over an extended period. The other attributes mentioned do not directly influence the longer-lasting effects in the same way. For example, rapid metabolism generally would lead to shorter effects, while the combination with other drugs can alter the effects but does not inherently contribute to the lasting duration of a single drug's action. Additionally, the dosage form may affect the rate of absorption but does not determine how long the drug's effects persist once it's in the system. Thus, the presence of psychoactive metabolites is a crucial aspect that underlines the prolonged effects seen with certain benzodiazepines.

**3. Which of the following is NOT a distinction between benzodiazepines and barbiturates?**

- A. Benzodiazepines have a faster onset of effects**
- B. Benzodiazepines have a longer duration of action**
- C. Benzodiazepines are less likely to be abused**
- D. Benzodiazepines are more toxic**

The correct response highlights a crucial distinction in the safety profiles of benzodiazepines compared to barbiturates. In general, benzodiazepines are considered to have a lower potential for toxicity than barbiturates. This is significant because barbiturates have a narrow therapeutic index, meaning that the difference between an effective dose and a toxic dose is small. In contrast, benzodiazepines are typically safer and have less risk of causing fatal overdose when used appropriately. When assessing the characteristics of benzodiazepines, it is recognized that they generally act for a shorter duration and do not exhibit the same level of abuse potential or withdrawal severity associated with barbiturates. While both drug classes can be habit-forming, benzodiazepines have a somewhat better safety profile in terms of withdrawal and overdose risk. Understanding these distinctions is essential for making informed clinical decisions regarding the management of anxiety and other conditions, as well as for assessing the risks associated with prescribing these medications.

**4. Which schedule represents substances that may lead to limited dependence and have accepted medical uses?**

- A. Schedule III**
- B. Schedule IV**
- C. Schedule V**
- D. Schedule I**

The classification of controlled substances is based on their potential for abuse, accepted medical use, and the level of dependency they may cause. Substances categorized under Schedule IV are those that have a legitimate medical use and a low potential for abuse relative to substances in higher schedules. While there is still some risk of dependency, it is significantly limited compared to higher schedules. Schedule IV includes medications like certain anti-anxiety agents and muscle relaxants, which can be prescribed for legitimate medical needs. These drugs can have risks associated with misuse or addiction, but they are also deemed safe enough for medical application when used as directed. In contrast, the other schedules present substances with varying levels of potential for dependence and medical acceptance. Schedule III substances may lead to moderate dependence and have accepted medical uses, but they are generally considered to have a higher potential for abuse than Schedule IV. Schedule V medications have even lower abuse potential than Schedule IV but are not as commonly recognized in practice. Lastly, Schedule I substances are characterized by a high potential for abuse and no accepted medical use. Thus, Schedule IV is accurately represented as containing substances that may support limited dependence while having accepted medical uses.

**5. Which of the following describes hashish oil?**

- A. A concentrated oil derived from hashish**
- B. THC oil extracted directly from the cannabis plant**
- C. An oil that contains no THC**
- D. A non-psychoactive oil used for cooking**

The correct response is that hashish oil is THC oil extracted directly from the cannabis plant. Hashish oil is a concentrated form of cannabis that is specifically high in tetrahydrocannabinol (THC), the primary psychoactive compound. It is derived from the resin of the cannabis plant, offering a potent product for use. This oil can be varied in concentration and is often used for recreational or medicinal purposes due to its high levels of THC. Other choices represent possibilities that do not align with the characteristics of hashish oil. For example, hashish oil is not characterized merely as a concentrated oil derived from hashish, which might suggest it could be something less potent or different than its actual concentrated form. Additionally, hashish oil is inherently linked to the presence of THC, making the claim of it containing no THC irrelevant. Lastly, while there are oils derived from cannabis that may be non-psychoactive, hashish oil specifically is recognized for its psychoactive properties, particularly through its THC content.

**6. What was the historical medical use of PCP?**

- A. Anesthetic**
- B. Antidepressant**
- C. Analgesic**
- D. Anticonvulsant**

Phencyclidine, commonly known as PCP, was historically developed in the 1950s as an anesthetic agent. It was initially created for use in medical settings due to its ability to induce dissociative anesthesia—meaning that it would produce a sense of detachment from the environment and self, while simultaneously providing pain relief. This property made it useful in surgeries and other medical procedures in which the patient needed to be rendered unconscious but still require some level of analgesic effect. However, the clinical use of PCP was eventually discontinued owing to its side effects, which included hallucinations and agitated behavior, ultimately leading to its classification as a controlled substance. Its historical role as an anesthetic is significant as it laid the groundwork for the understanding of dissociative anesthetics and influenced the development of newer anesthetic agents that are safer and have fewer mental health impacts.

**7. How many stages of alcohol withdrawal are typically recognized?**

- A. 2**
- B. 3**
- C. 4**
- D. 5**

The correct answer indicates that there are typically four recognized stages of alcohol withdrawal. These stages outline the progress of symptoms that may occur as an individual reduces or stops their alcohol intake after a period of prolonged use. Understanding these stages is crucial for addiction counselors as it helps in assessing the severity of withdrawal and determining appropriate treatment measures. The stages are often defined as follows: 1. **Stage One** includes initial symptoms like anxiety, insomnia, and gastrointestinal discomfort. 2. **Stage Two** may involve more pronounced symptoms, such as increased heart rate, elevated blood pressure, and mild confusion. 3. **Stage Three** is characterized by severe symptoms, including hallucinations and agitation. 4. **Stage Four**, which is the most extreme, can lead to delirium tremens (DTs), a potentially life-threatening condition that can cause severe confusion, seizures, and other critical issues. In clinical practice, recognizing these stages allows healthcare providers to monitor patients closely and implement interventions as needed to ensure safety during the detoxification process.

**8. What is a characteristic of the middle stage of alcohol dependence?**

- A. Must drink to function**
- B. Lack of preoccupation with drinking**
- C. Temporary sobriety**
- D. Feelings of guilt**

In the middle stage of alcohol dependence, one of the significant characteristics is the emergence of patterns of temporary sobriety. This may manifest as brief periods during which the individual stops drinking, either voluntarily or due to external circumstances such as legal issues, social pressures, or health concerns. However, these periods of sobriety are often not indicative of lasting recovery, as the individual is likely to resume drinking. This cycle can further entrench the dependence, as the individual experiences the negative consequences of their drinking but often returns to alcohol as a coping mechanism. During this stage, the individual may also struggle with various emotional and psychological challenges, including guilt related to their drinking behaviors and the impact of their alcohol use on their life and relationships. Recognizing this characteristic is vital for understanding the progression of alcohol dependence and the complexities faced by individuals in this stage. This understanding can inform interventions and support strategies tailored to help individuals move towards more sustainable recovery.

**9. What result does acetaldehyde have when produced in large amounts?**

- A. It acts as a stimulant**
- B. It serves as energy**
- C. It is poisonous**
- D. It enhances mood**

Acetaldehyde is a byproduct of ethanol metabolism in the body, particularly when someone consumes alcohol. When produced in large amounts, acetaldehyde is recognized for its toxic properties. It is considered a poisonous compound that can lead to various adverse health effects, including hangover symptoms like headache, nausea, and vomiting. Additionally, long-term exposure to high levels of acetaldehyde has been associated with more severe health issues, such as liver damage and an increased risk of certain types of cancer. Its role as a toxic substance underscores the importance of moderation when consuming alcohol, as excessive intake can lead to a significant buildup of acetaldehyde in the bloodstream, contributing to its harmful effects. Thus, understanding acetaldehyde's toxicity is crucial for addiction counseling, particularly when discussing the physiological impacts of alcohol use and the risks of alcohol-related disorders.

**10. Between short-acting and long-acting barbiturates, which type is more likely to be prescribed for detox?**

- A. Short-acting barbiturates**
- B. Long-acting barbiturates**
- C. Both are equally effective**
- D. Neither are prescribed for detox**

Long-acting barbiturates are typically preferred for detoxification because they provide a more gradual and stable release of the medication in the body. This can help to mitigate withdrawal symptoms that often arise during detox. Since long-acting barbiturates have a longer half-life, they maintain therapeutic levels for an extended period, which aids in minimizing the peaks and troughs that can occur with shorter-acting substances. In a detox setting, the goal is to ensure safety and comfort for the individual, and the use of long-acting formulations allows for a smoother transition away from dependence on the drug. Short-acting barbiturates, while they may have their place in other treatment regimens, can lead to more rapid onset of withdrawal symptoms, making them less suitable for detox purposes. Therefore, the preference for long-acting barbiturates aligns with the objective of providing a more consistent therapeutic effect during the detoxification process, reducing the risks associated with withdrawal.

# 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://nationalcertifiedaddictioncounselor-ncac1.examzify.com>**

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

**SAMPLE**