

VETERINARY PHARMACOLOGY DRUGS PRACTICE TEST (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

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THE FULL VERSION STUDY GUIDE**

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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. Which cholinergic agent is used to treat atony of the GI tract and to stimulate uterine contractions in swine?**
 - A. Carbamylcholine
 - B. Bethanechol
 - C. Pilocarpine
 - D. Neostigmine
- 2. Which skeletal muscle relaxant is used in combination with ketamine and xylazine in horses to induce general anesthesia and is also used as an expectorant?**
 - A. Pilocarpine
 - B. Guaifenesin
 - C. Aminopentamide
 - D. Potassium Bromide
- 3. Which drug is used to treat diarrhea and is a Class V controlled substance?**
 - A. Loperamide
 - B. Morphine
 - C. Diphenoxylate
 - D. Hydrocodone
- 4. Which anticholinergic is used to treat diarrhea?**
 - A. Methscopolamine
 - B. Scopolamine
 - C. Atropine
 - D. Glycopyrrolate
- 5. Which statement about the relationship between half-life, volume of distribution, and clearance is correct?**
 - A. $t_{1/2}$ is independent of V_d and CL .
 - B. $t_{1/2}$ increases as CL increases.
 - C. $t_{1/2}$ is proportional to V_d and inversely proportional to CL .
 - D. $t_{1/2}$ depends on dose.

- 6. Which inhalant anesthetic is rapidly induced and recovered and has about 3% hepatic metabolism?**
- A. Sevoflurane
 - B. Guaifenesin
 - C. Pilocarpine
 - D. Xylazine
- 7. Why is liver enzyme monitoring important during long-term itraconazole therapy in dogs?**
- A. Itraconazole can cause hepatotoxicity; monitoring ALT/AST helps detect early liver injury
 - B. Itraconazole causes kidney injury; monitor BUN/creatinine
 - C. It has no hepatic effects; monitoring not needed
 - D. It improves liver function; monitor ALP
- 8. Which adrenergic agent is used to raise blood pressure?**
- A. Isoproterenol
 - B. Phenylephrine
 - C. Dobutamine
 - D. Norepinephrine
- 9. Which MAO-B inhibitor is used to treat canine cognitive dysfunction (Anipryl)?**
- A. Amitriptyline
 - B. Selegiline
 - C. Tolcapone
 - D. Rasagiline
- 10. Which drug is used to treat diarrhea and is combined with atropine (class V controlled substance)?**
- A. Diphenoxylate
 - B. Hydrocodone
 - C. Apomorphine
 - D. Carfentanil

Answers

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

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Explanations

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1. Which cholinergic agent is used to treat atony of the GI tract and to stimulate uterine contractions in swine?

- A. Carbamylcholine**
- B. Bethanechol
- C. Pilocarpine
- D. Neostigmine

Cholinergic stimulation of the GI tract and uterus depends on activating muscarinic receptors to increase smooth muscle motility and contractions. Carbamylcholine (carbachol) is a direct cholinergic agonist that acts on both muscarinic and nicotinic receptors and, importantly, is relatively resistant to acetylcholinesterase, giving a longer duration of action. This combination makes it effective at promoting GI motility and uterine contractions in swine. Bethanechol is muscarinic-selective and can stimulate GI motility, but it lacks the nicotinic component that can enhance overall smooth muscle responsiveness, and in swine the preferred agent for uterine stimulation can be carbamylcholine. Pilocarpine is mainly used for muscarinic effects in the eye and salivation, not for GI atony or labor induction. Neostigmine increases acetylcholine levels indirectly by inhibiting acetylcholinesterase, but its broad activity and longer systemic effects make it less specific for these swine indications.

2. Which skeletal muscle relaxant is used in combination with ketamine and xylazine in horses to induce general anesthesia and is also used as an expectorant?

- A. Pilocarpine
- B. Guaifenesin**
- C. Aminopentamide
- D. Potassium Bromide

The idea being tested is that guaifenesin serves as a skeletal muscle relaxant in equine anesthesia and also acts as an expectorant. In horses, a common induction regimen combines ketamine and xylazine with guaifenesin to achieve smooth, deeper muscle relaxation while the animal is under anesthesia; ketamine provides dissociative anesthesia and xylazine adds analgesia and sedation, and guaifenesin relaxes skeletal muscles to reduce resistance and improve intubation conditions. At the same time, guaifenesin acts as an expectorant, thinning and helping clear mucus in the airways. The other substances listed do not have both roles: pilocarpine is a cholinergic agent not used for muscle relaxation or as an expectorant; aminopentamide is an anticholinergic used for GI spasms; potassium bromide is an anticonvulsant.

3. Which drug is used to treat diarrhea and is a Class V controlled substance?

- A. Loperamide
- B. Morphine
- C. Diphenoxylate**
- D. Hydrocodone

Diphenoxylate is an opioid that acts in the gut to slow intestinal motility, giving more time for water absorption and producing firmer stools, which helps treat diarrhea. It's often given with atropine to deter abuse; the atropine adds a counteractive effect at higher doses, making misuse less appealing. This combination is why it's classified as a Schedule V (Class V) controlled substance. Other options either aren't controlled substances or aren't the standard diarrhea treatment: loperamide is also used for diarrhea but is not a controlled substance, while morphine and hydrocodone are stronger opioids used for pain, with higher abuse potential and not used as first-line antidiarrheal therapies.

4. Which anticholinergic is used to treat diarrhea?

A. Methscopolamine

B. Scopolamine

C. Atropine

D. Glycopyrrolate

Anticholinergics help treat diarrhea by blocking muscarinic receptors in the gut, which lowers intestinal smooth-muscle contractions and reduces secretions. This slows intestinal transit and allows more water reabsorption, easing diarrhea. Methscopolamine is especially suited for GI use because it's a quaternary ammonium antimuscarinic with minimal penetration into the central nervous system, so its effects are primarily peripheral in the gut. That makes it effective for reducing diarrhea with fewer CNS side effects compared to agents like scopolamine or atropine, which cause more central effects. Glycopyrrolate can also reduce GI secretions and motility, but methscopolamine is the classic choice for an antidiarrheal in veterinary contexts due to its gut-specific action and lower CNS impact.

5. Which statement about the relationship between half-life, volume of distribution, and clearance is correct?

A. $t_{1/2}$ is independent of V_d and CL .

B. $t_{1/2}$ increases as CL increases.

C. $t_{1/2}$ is proportional to V_d and inversely proportional to CL .

D. $t_{1/2}$ depends on dose.

The key idea is how half-life relates to distribution and clearance in first-order kinetics. The elimination rate constant k equals clearance divided by volume of distribution ($k = CL / V_d$), and the half-life $t_{1/2}$ equals 0.693 divided by k . Rewriting gives $t_{1/2} = 0.693 \times V_d / CL$. So, $t_{1/2}$ increases with a larger volume of distribution and decreases with higher clearance. Dose generally doesn't affect $t_{1/2}$ in linear kinetics, so it's not dependent on dose. That's why the statement that half-life is proportional to V_d and inversely proportional to CL is the correct description.

6. Which inhalant anesthetic is rapidly induced and recovered and has about 3% hepatic metabolism?

A. Sevoflurane

B. Guaifenesin

C. Pilocarpine

D. Xylazine

Rapid induction and recovery with only limited liver metabolism describe a volatile anesthetic that is cleared quickly from the body, mainly through the lungs, due to low blood-gas solubility and minimal hepatic processing. Sevoflurane fits this pattern well: it has relatively low solubility in blood, so it moves rapidly into the brain to induce anesthesia and is washed out quickly as the animal exhales, producing a fast wake-up. Only a small portion—about 3%—is metabolized by the liver, so most of the agent leaves unchanged via expiration, reducing duration and metabolic concerns. The other options are not inhalant anesthetics with this profile; guaifenesin is an oral muscle relaxant/expectorant, pilocarpine is a cholinergic drug, and xylazine is an α -2 agonist sedative/analgesic. Sevoflurane is the best fit for rapid induction and recovery with roughly 3% hepatic metabolism.

7. Why is liver enzyme monitoring important during long-term itraconazole therapy in dogs?

- A. Itraconazole can cause hepatotoxicity; monitoring ALT/AST helps detect early liver injury**
- B. Itraconazole causes kidney injury; monitor BUN/creatinine
- C. It has no hepatic effects; monitoring not needed
- D. It improves liver function; monitor ALP

Itraconazole can affect the liver in dogs, so checking liver enzymes during long-term therapy helps catch toxicity early. ALT is the best early indicator of hepatocellular injury; rising ALT signals liver cell damage before symptoms appear, allowing timely dose adjustments or stopping the drug if needed. AST can also rise with liver injury, but it's less liver-specific. Baseline testing before starting therapy and periodic rechecking during treatment are standard to ensure the liver is handling the medication. The other lines of monitoring (like kidney function) aren't the main concern with itraconazole, and saying there are no hepatic effects or that it merely improves liver function isn't accurate.

8. Which adrenergic agent is used to raise blood pressure?

- A. Isoproterenol
- B. Phenylephrine
- C. Dobutamine
- D. Norepinephrine**

Raising blood pressure with an adrenergic drug relies on increasing vascular tone. Norepinephrine acts mainly on alpha-1 receptors on vascular smooth muscle, causing vasoconstriction. This increases systemic vascular resistance and raises mean arterial pressure. It also has beta-1 effects that can boost cardiac contractility and, to some extent, heart rate, helping maintain cardiac output in hypotensive states. The net result is a reliable rise in blood pressure, which is why it's a primary vasopressor used in acute hypotension and shock. Other agents don't fit as well for this goal. An agent that mainly stimulates beta receptors tends to raise heart rate and cause vasodilation, which can lower or destabilize blood pressure. An inotrope that increases contractility without vasoconstriction can still lower BP if afterload is reduced. An alpha-1 agonist without beta activity can raise blood pressure but may not support cardiac output effectively, whereas norepinephrine provides both vasoconstriction and some cardiac support, making it the best choice here.

9. Which MAO-B inhibitor is used to treat canine cognitive dysfunction (Anipryl)?

- A. Amitriptyline
- B. Selegiline**
- C. Tolcapone
- D. Rasagiline

Blocking MAO-B in the brain to preserve dopamine is the therapeutic idea for canine cognitive dysfunction. Selegiline is a selective MAO-B inhibitor approved for this condition (brand name Anipryl). By inhibiting MAO-B, it slows the breakdown of dopamine, helping maintain dopaminergic signaling that tends to decline with age, which can improve cognition and activity in affected dogs. The other drugs don't address this mechanism. Amitriptyline is a tricyclic antidepressant with broad effects that aren't aimed at correcting dopaminergic loss in this context. Tolcapone inhibits COMT, not MAO-B, and isn't the veterinary choice for canine cognitive dysfunction. Rasagiline is another MAO-B inhibitor but is not approved for this canine indication, so selegiline remains the recommended option.

10. Which drug is used to treat diarrhea and is combined with atropine (class V controlled substance)?

- A. Diphenoxylate
- B. Hydrocodone
- C. Apomorphine
- D. Carfentanil

Opioid-based antidiarrheal drugs work by activating μ -opioid receptors in the enteric nervous system, which slows intestinal motility and allows more water reabsorption, helping to firm up stools. Diphenoxylate is the prepare-and-use option that fits this role. It is specifically formulated with a small amount of atropine, which serves as a deterrent to abuse; if someone tries to take much more than prescribed, the atropine produces unpleasant anticholinergic effects (like dry mouth, rapid heartbeat, and potential discomfort), discouraging misuse. This combination is a Schedule V controlled substance because, when used as directed, it has relatively low abuse potential compared with stronger opioids. The other choices don't align with the use for diarrhea in combination with an abuse-deterrent: hydrocodone is a stronger opioid mainly used for pain and carries a higher abuse risk, apomorphine is used to induce vomiting, and carfentanil is an extremely potent opioid used in specialized settings, not for treating diarrhea.

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:

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

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