

Wisconsin Substance Abuse Counselor 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

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- 1. Before charging fees, counselors must disclose what to clients?**
 - A. Enrollment documents**
 - B. No disclosure required**
 - C. Consent to treatment**
 - D. Counselor fee disclosure**

- 2. Which medications are commonly used in MAT for opioid use disorder?**
 - A. Methadone and Buprenorphine only**
 - B. Buprenorphine and Naloxone**
 - C. Methadone, buprenorphine, and naltrexone**
 - D. Naltrexone alone**

- 3. What is the importance of documentation in SUD counseling?**
 - A. Documentation is optional.**
 - B. Documentation is used only for billing.**
 - C. Documentation should be kept private from other treating staff.**
 - D. Documentation ensures continuity of care, legal compliance, and accountability; supports treatment planning.**

- 4. If a credential holder's license is revoked in another state, within how many hours must they report it?**
 - A. 24 hours**
 - B. 72 hours**
 - C. 48 hours**
 - D. One week**

- 5. How should language be used when addressing cultural needs in treatment planning?**
 - A. Interventions should be tailored to respect and address cultural beliefs, values, and language needs.**
 - B. Language is not a factor.**
 - C. Use only the therapist's language regardless of client.**
 - D. Force the client's language onto others.**

- 6. What is the formal term for the start of random testing under SPS 7.11?**
- A. Upon enrollment in the program**
 - B. Random testing initiation**
 - C. Baseline testing**
 - D. Enrollment testing**
- 7. What is the recommended approach when personal beliefs conflict with a client's goals?**
- A. Share all personal beliefs with the client to align values.**
 - B. Seek supervision and adhere to ethics.**
 - C. Ignore ethical standards to please the client.**
 - D. End the therapeutic relationship immediately.**
- 8. Which statement best describes the content of a relapse prevention plan?**
- A. Only the triggers, no coping strategies.**
 - B. Only steps to resume abstinence.**
 - C. A written plan listing triggers, coping strategies, and steps to resume abstinence or safer use.**
 - D. A general motivational quote.**
- 9. What is a relapse prevention strategy?**
- A. Avoid all social interactions.**
 - B. Identifying triggers, developing coping skills, and planning for high-risk situations.**
 - C. Ignore triggers and hope for the best.**
 - D. Only focus on pharmacotherapy.**
- 10. Changes in employment must be reported within 5 days.**
- A. Timely notification of job changes**
 - B. Informed consent for records**
 - C. Recordkeeping**
 - D. Authorization to release drug test results**

Answers

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

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Explanations

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1. Before charging fees, counselors must disclose what to clients?

- A. Enrollment documents**
- B. No disclosure required**
- C. Consent to treatment**
- D. Counselor fee disclosure**

Providing financial transparency is essential. Before charging fees, the counselor must clearly reveal the fee structure and related financial policies so clients understand what they will be billed for, how and when payment is due, and any interactions with insurance or third-party billing, cancellations, and refunds. This disclosure supports informed consent and ethical practice by preventing surprises and fostering trust. Enrollment documents, consent to treatment, or the idea that no disclosure is required do not address the specific financial terms and policies clients need before fees are charged, making counselor fee disclosure the correct requirement.

2. Which medications are commonly used in MAT for opioid use disorder?

- A. Methadone and Buprenorphine only**
- B. Buprenorphine and Naloxone**
- C. Methadone, buprenorphine, and naltrexone**
- D. Naltrexone alone**

MAT for opioid use disorder relies on medications that interact with the opioid system in different ways to reduce withdrawal, craving, and relapse risk. Methadone is a full mu-opioid receptor agonist that smoothly suppresses withdrawal and cravings with a long duration of action, typically dispensed in a certified clinic under supervision. Buprenorphine is a partial agonist with a ceiling effect on respiratory depression, which lowers overdose risk and makes office-based prescribing feasible with proper waivers; it's often given with naloxone to deter misuse. Naltrexone is an antagonist that blocks opioid effects and is started after detoxification, available in daily or monthly extended-release forms to support relapse prevention. Including all three—methadone, buprenorphine, and naltrexone—reflects the main pharmacologic options used in MAT for opioid use disorder, each serving different clinical scenarios and settings. Naloxone, while crucial for overdose reversal, is not used as a primary MAT agent by itself.

3. What is the importance of documentation in SUD counseling?

- A. Documentation is optional.
- B. Documentation is used only for billing.
- C. Documentation should be kept private from other treating staff.
- D. Documentation ensures continuity of care, legal compliance, and accountability; supports treatment planning.**

Documentation in SUD counseling is essential for continuity of care, legal compliance, and accountability, and it supports treatment planning. Keeping accurate, timely records allows any clinician involved in a client's care to understand history, goals, interventions, and responses, so transitions between staff or levels of care happen smoothly without gaps. The notes, assessments, treatment plans, progress updates, and risk assessments create a clear picture of what has been done and what needs to be done next, which directly informs decisions about modifications to goals and approaches. Legal and ethical requirements make documentation foundational. Records are part of the official medical record and are subject to standards, audits, and potential legal scrutiny. Proper documentation demonstrates that services were delivered in a professional, ethical manner, that consent and confidentiality rules were followed, and that funding or licensing requirements are met. When records are complete and accurate, they also protect the clinician and the agency by showing a clear picture of the care provided. Documentation also anchors treatment planning. By recording assessment findings, progress toward goals, barriers encountered, and responses to interventions, clinicians can tailor plans to the client's evolving needs. This ongoing documentation supports discharge planning, continuity across treatment teams, and measurable progress, making the care more effective and coordinated. The other options miss important realities. Documentation is not optional; it's a required part of professional practice. It serves more than billing purposes, encompassing clinical reasoning, progress, and planning. Information should be accessible to authorized treating staff to coordinate care and ensure safety, with confidentiality protections in place, rather than kept private from the team.

4. If a credential holder's license is revoked in another state, within how many hours must they report it?

- A. 24 hours
- B. 72 hours
- C. 48 hours**
- D. One week

The main idea is that professional license holders must report significant disciplinary actions taken by other states promptly to protect the public. If your credential is revoked in another state, that outcome signals a serious concern about your fitness to practice and the potential risk to clients. The required window is 48 hours, because that timeframe ensures the Wisconsin regulatory board is alerted quickly enough to review the situation and determine any appropriate actions to safeguard clients. Timeframes like 24 hours are too tight for gathering all needed documentation, while 72 hours or a week could leave a gap in public safety. If this happens, notify the Wisconsin Department of Safety and Professional Services within 48 hours and provide details of the action, the date, and the issuing state's order; be prepared for possible further review or action in Wisconsin.

5. How should language be used when addressing cultural needs in treatment planning?

A. Interventions should be tailored to respect and address cultural beliefs, values, and language needs.

B. Language is not a factor.

C. Use only the therapist's language regardless of client.

D. Force the client's language onto others.

Language and culture shape how a client understands substance use and engages with treatment, so plans must honor cultural beliefs, values, and language needs. When the plan is aligned with the client's language preferences and cultural context, the client can more clearly understand options, participate in goal setting, and follow through with interventions. Providing language-appropriate services—such as interpretation, translated materials, or bilingual staff—helps ensure accurate communication, informed consent, and stronger engagement, which supports better outcomes. Respecting cultural beliefs and practices, where appropriate and safe, can also increase relevance and acceptance of the treatment approach. The other options miss this essential aspect: language is a factor in treatment, insisting on the therapist's language can create barriers and undermine autonomy, and forcing language on others is unethical.

6. What is the formal term for the start of random testing under SPS 7.11?

A. Upon enrollment in the program

B. Random testing initiation

C. Baseline testing

D. Enrollment testing

Random testing initiation is the formal term for when the randomized testing begins under SPS 7.11. This wording specifically marks the procedural start of the random testing process after enrollment, distinguishing it from testing that happens at enrollment or from baseline testing used to establish an initial status. Baseline testing refers to a one-time initial assessment for comparison, not the ongoing start of random testing, and enrollment-related phrases imply testing begins at enrollment rather than the defined initiation of the random testing protocol.

7. What is the recommended approach when personal beliefs conflict with a client's goals?

A. Share all personal beliefs with the client to align values.

B. Seek supervision and adhere to ethics.

C. Ignore ethical standards to please the client.

D. End the therapeutic relationship immediately.

When a counselor's personal beliefs clash with what a client wants to achieve, the right move is to seek supervision and follow professional ethics. This keeps care client-centered, prevents the counselor from imposing beliefs, and uses supervision to work through the conflict, clarify boundaries, and determine appropriate steps within the ethics code. Sharing all personal beliefs would risk biasing the session, and ignoring ethics or ending the relationship without proper process would undermine client welfare and professional standards. By consulting a supervisor and adhering to ethics, the counselor supports the client's goals while maintaining professional integrity.

8. Which statement best describes the content of a relapse prevention plan?

- A. Only the triggers, no coping strategies.
- B. Only steps to resume abstinence.
- C. A written plan listing triggers, coping strategies, and steps to resume abstinence or safer use.**
- D. A general motivational quote.

Relapse prevention planning is about having a concrete, written roadmap that helps a person anticipate what could trigger use, use practical coping skills in the moment, and know exactly what steps to take to get back on track. The best plan explicitly lists identified triggers, outlines coping strategies to handle cravings and high-risk situations, and provides clear steps to resume abstinence or, when abstinence isn't immediately possible, safer use strategies. This combination makes the plan actionable and personalized, so the person can respond effectively when pressure or cravings arise. If a plan only lists triggers, it leaves a person without the tools to manage the urge in real time. If it only details steps to resume abstinence, it omits how to handle triggers and cravings in the moment. A generic motivational quote, while encouraging, offers no concrete guidance. The written plan that includes triggers, coping strategies, and concrete steps to resume abstinence or safer use is the most complete and useful approach.

9. What is a relapse prevention strategy?

- A. Avoid all social interactions.
- B. Identifying triggers, developing coping skills, and planning for high-risk situations.**
- C. Ignore triggers and hope for the best.
- D. Only focus on pharmacotherapy.

Relapse prevention focuses on proactive planning to manage risk and maintain recovery. The strongest approach combines recognizing what prompts a return to use, building skills to handle urges and difficult situations, and having a concrete plan for high-risk moments. Identifying triggers helps you know what to watch for: specific people, places, emotions like stress or loneliness, cravings, or certain routines that have led to use in the past. By naming these triggers, you can prepare in advance how you'll respond instead of reacting impulsively. Developing coping skills gives you tools to ride out cravings and stressful moments without using. This includes techniques like urge surfing, delaying before acting, reaching out to a support person, practicing calming or grounding exercises, and substituting healthier activities during vulnerable times. Planning for high-risk situations means having a clear, written plan for how to handle potential relapse scenarios. This can involve avoiding certain environments when possible, knowing who to contact for immediate support, having a go-to activity or coping strategy ready, and recognizing early warning signs so you can take action before slipping back into use. Why the other approaches fall short: avoiding all social interactions isolates you and isn't realistic or healthy for long-term recovery. Hoping triggers disappear or hoping for the best lacks concrete steps to take when urges arise. Focusing only on medication ignores the behavioral and cognitive elements essential to staying abstinent, since using effectively requires skills and planning in real life, not medication alone.

10. Changes in employment must be reported within 5 days.

A. Timely notification of job changes

B. Informed consent for records

C. Recordkeeping

D. Authorization to release drug test results

Timely notification of job changes is the focus here. In many professional rules for counselors, licensees must keep the licensing board informed whenever their employment or practice setting changes, within a short deadline such as five days. This helps keep the board's records accurate, ensures appropriate supervision and scope of practice, and supports accountability for where and how you're practicing. The other options involve privacy and consent (informed consent for records, authorization to release drug test results) or general recordkeeping. While important aspects of professional practice, they do not address the requirement to notify the board promptly about changes in employment.

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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://wisubstanceabusecounselor.examzify.com>

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

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