

# Cheap Nursing CEUs

## Substance Use Disorders

**1. According to the DSM-5, substance use disorders (SUDs) comprise a cluster of physiological, cognitive, and behavioral symptoms which indicate an individual continues to use a substance despite substantial substance-related problems.**

- A. True
  - B. False
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**2. The diagnosis of SUDs can be applied to which of the following classes of drugs?**

- A. Alcohol
  - B. Tobacco
  - C. Sedatives
  - D. All of the above
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**3. Which of the following statements regarding tobacco use disorders (TUDs) is most accurate?**

- A. TUDs are not common in persons who use smokeless tobacco
  - B. The disappearance of nausea and dizziness after the repeated intake of tobacco does not exemplify tolerance to the substance
  - C. Persons with TUDs often fail to fulfill major role obligations
  - D. Persons with TUDs may have persistent interpersonal or social problems
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**4. Cannabis use disorders (CUDs) do not frequently show up in individuals with other substance use disorders.**

- A. True
  - B. False
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**5. Which of the following are signs of chronic cannabis use?**

- A. Yellowing of finger tips
  - B. Chronic cough
  - C. Red eyes
  - D. All of the above
- 

**6. Inhalant Use Disorders (IUDs) in adult populations include mostly females and is comprised of predominantly Native Americans.**

- A. True
  - B. False
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**7. Which of the following statements is most accurate?**

- A. Violent or aggressive behavior tends to be common when low doses of stimulants are taken
  - B. Individuals with stimulant use disorders commonly develop conditioned responses to substance-related stimuli
  - C. Prevalence rates for stimulant use disorders of the amphetamine type are highest in European American populations
  - D. Stimulant use disorders develop more slowly when the stimulants are taken intravenously or smoked
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**8. Like with most other substances of abuse, opioids are likely to produce symptoms of mental disturbance.**

- A. True
  - B. False
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**9. A 28 year-old male patient presents with a potential alcohol use disorder. After examining the patient, it is determined that the patient does suffer from an alcohol use disorder. The patient reports he only drinks alcohol in a binge-like manner. The patient also reports he does not typically experience alcohol tolerance or withdrawal. Based on the previous patient information, the patient's alcohol use disorder may be classified as which of the following?**

- A. Mild
  - B. Moderate
  - C. Severe
  - D. Very severe
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**10. Which of the following substances are associated with phencyclidine use disorders (PUDs)?**

- A. Cyclohexamine
  - B. Dizocilpine
  - C. Ketamine
  - D. All of the above
- 

**11. Which of the following statements regarding sedative, hypnotic, and anxiolytic use disorders (SHAUDs) is most accurate?**

- A. Sudden onset hypotension and respiratory depression that may lead to death can occur as the individual increases intake of the substance to achieve euphoria and/or other desired effects
- B. Sudden onset hypertension and respiratory depression that may lead to death can occur as the individual increases intake of the substance to achieve euphoria and/or other desired

effects

C. Sudden onset hypertension and respiratory depression that may lead to death can occur as the individual decreases intake of the substance to achieve desired effects

D. Sudden onset hypotension and respiratory depression that may lead to death can occur as the individual decreases intake of the substance to achieve euphoria and/or other desired effects

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**12. Which of the following parts of the brain are especially vulnerable to damage from alcohol abuse?**

A. Cerebral cortex

B. Hippocampus

C. Cerebellum

D. All of the above

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**13. Which of the following statements regarding alprazolam is most accurate?**

A. Non-medical use of alprazolam was associated with decreases in emergency department visits

B. Alprazolam increases movement of chemicals in the brain to reduce nervous tension

C. Evidence suggests that alprazolam is not habit-forming

D. Individuals with a history of drug/alcohol addiction, depression, or suicidal thoughts/behaviors should avoid taking alprazolam

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**14. Heroin use has been associated with increased risk of hepatitis C.**

A. True

B. False

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**15. Which of the following have been linked to the long-term use of methamphetamine?**

A. Memory loss

B. Depression

C. Weight gain

D. Both A and B

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**16. Which of the following statements is most accurate?**

A. Schedule II substances have no accepted medical use in the United States

B. Schedule II substances have high potential for abuse that may lead to severe physical or psychological dependence

C. Oxycodone is a Schedule III substance

D. Diazepam is a Schedule III substance

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**17. Which of the following may be considered a sign of addiction?**

- A. Experiences no withdrawal symptoms when trying to quit
  - B. Does not need more of a substance to get the same high
  - C. Withdrawing from family and friends or giving up other activities to use substances
  - D. All of the above
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**18. Addiction may be referred to as a primary, chronic disease of brain reward, motivation, memory, and related circuitry.**

- A. True
  - B. False
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**19. Addiction includes which of the following features?**

- A. The compulsion to seek and use drugs
  - B. A loss of control over how the drugs are used
  - C. The emergence of a negative emotional state
  - D. All of the above
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**20. Dopamine is a neurotransmitter that regulates movement, cognition, motivation, emotion, and feelings of pleasure.**

- A. True
  - B. False
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**21. A 32 year-old female patient presents for addiction treatment. The patient reports she wants to use drugs because she feels doomed and that there is no way out of her current situation. The patient also reports she cannot think about anything else other than drug use. What phase of the addiction cycle is the patient currently in?**

- A. Phase 1
  - B. Phase 2
  - C. Phase 3
  - D. Phase 4
- 

**22. A 42 year-old male patient presents for addiction treatment. The patient reports his drug use has spiraled out of control to the point where he has no control over his actions. What phase of the addiction cycle is the patient currently in?**

- A. Phase 1
  - B. Phase 2
  - C. Phase 4
  - D. Phase 5
-

**23. A 37 year-old female presents for addiction treatment. The patient reports she feels sorry for her recent drug use and is ashamed of her actions. What phase of the addiction cycle is the patient currently in?**

- A. Phase 4
  - B. Phase 5
  - C. Phase 6
  - D. Phase 7
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**24. Which of the following statements regarding addiction treatment is most accurate?**

- A. Addiction treatment should not address other possible mental disorders
  - B. Medically assisted withdrawal management is the last stage of treatment
  - C. Treatment must be voluntary for it to be effective
  - D. Treatment programs should test patients for tuberculosis, hepatitis B and C
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**25. The primary goal of prevention is to delay or prevent the onset of substance use and/or abuse.**

- A. True
  - B. False
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**26. Which of the following statements is most accurate?**

- A. The educational model does not assume that substance abuse results from poor choices made in ignorance
  - B. The medical model treats substance abuse as if it were an infectious epidemic
  - C. The psychosocial model is based on the assumption that substance abuse is a moral issue
  - D. The sociocultural model assumes substances are used as a means of coping with day-to-day frustrations and problems
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**27. Prevention programs should increase risk factors and enhance protective factors.**

- A. True
  - B. False
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**28. A 29 year-old male patient presents to his primary care physician with questions about addiction. The patient's primary care physician recommends that the patient attend a Students Taught Awareness and Resistance (STAR) program. What type of prevention is the STAR program?**

- A. Primary level of prevention
  - B. Secondary level of prevention
  - C. Tertiary prevention
  - D. None of the above
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**29. Antabuse may be administered to patients who have abstained from alcohol use for a minimum of 12 hours and show blood alcohol levels of zero.**

- A. True
  - B. False
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**30. Campral is contraindicated in patients with severe renal impairment (creatinine clearance less than or equal to 30 mL/min).**

- A. True
  - B. False
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**31. Which of the following statements regarding naltrexone is most accurate?**

- A. Naltrexone is an agonist that blocks the effect of other narcotics and alcohol
  - B. Naltrexone is an agonist that increases the effect of other narcotics and alcohol
  - C. Naltrexone is an antagonist that blocks the effect of other narcotics and alcohol
  - D. Naltrexone is an antagonist that increases the effect of other narcotics and alcohol
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**32. The typical maintenance dose for Suboxone ranges from 12 mg to 16 mg.**

- A. True
  - B. False
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**33. If a patient on methadone wants to switch to buprenorphine, the methadone dose should be tapered to not more than 40 mg per day for a minimum of one week before initiating the buprenorphine induction treatment.**

- A. True
  - B. False
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**34. Which of the following statements is most accurate?**

- A. Naltrexone will block the pharmacologic effects of 45 mg of intravenously administered heroin for up to 24 hours.
  - B. Naltrexone will block the pharmacologic effects of 25 mg of intravenously administered heroin for up to 24 hours.
  - C. Naltrexone will block the pharmacologic effects of 25 mg of intravenously administered heroin for up to 48 hours.
  - D. Naltrexone will block the pharmacologic effects of 35 mg of intravenously administered heroin for up to 48 hours.
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**35. Motivational Enhancement therapy is designed to help a patient resolve ambivalence regarding his or her use of substances.**

- A. True
  - B. False
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