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Understanding and Addressing Substance Use: A Comprehensive Guide for Healthcare Professionals

1. A nurse is comparing two patients: one consumed three beers at a single party without impairing function, the other repeatedly loses jobs, relationships, and legal standing due to drinking. Which feature best distinguishes substance use disorder from substance misuse?

A. Use in a quantity or frequency that risks harm to self or others
B. Temporary overuse during a special occasion
C. Repeated use despite occupational, social, familial, or legal consequences
D. Use to cope with stress or negative emotions

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2. Which phrasing in a patient record reflects person-centered, non-stigmatizing language?

A. Chronic alcoholic
B. Drug junkie
C. Person with an alcohol use disorder
D. Clean patient

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3. Impairment of which brain region most directly reduces executive control and decision making in addiction?

A. Nucleus accumbens
B. Basal ganglia
C. Prefrontal cortex
D. Extended amygdala

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4. According to DSM-5 criteria, how many symptoms must an individual exhibit to be diagnosed with severe substance use disorder?

A. Six or more symptoms
B. Four to five symptoms
C. Two to three symptoms
D. One symptom

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5. Which scenario describes a protective factor against developing a substance use disorder?

A. Adolescent with a consistent optimistic outlook
B. Teen who begins substance use in a high-stress environment
C. Adult with early exposure to peer substance use

D. Child with delayed prefrontal cortex maturation

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6. Which evidence-based treatment modality provides tangible rewards for abstinence milestones?

A. Cognitive behavioral therapy
B. Dialectical behavior therapy
C. Motivational interviewing
D. Contingency management

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7. A nurse plans an intervention that empowers patients through accurate information and decision-making. Which action fits this goal?

A. Monitoring vital signs hourly
B. Providing tailored psychoeducation about the disorder
C. Imposing a strict abstinence contract
D. Conducting unstructured peer discussions

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8. Which screening tool is a 10-item self-administered questionnaire with items scored 0–4 for identifying risky alcohol use?

A. AUDIT
B. CAGE
C. DAST
D. ASSIST

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9. Spending several hours each day obtaining cocaine and neglecting family is an example of which DSM-5 substance use category?

A. Risky use
B. Impaired control
C. Physical dependence
D. Social problems

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10. Ketamine is classified pharmacologically as which type of hallucinogen?

A. Psychedelic
B. Stimulant
C. Depressant
D. Dissociative drug

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11. Which scenario illustrates the DSM-5 criterion of 'continued use despite interpersonal problems' (social problems)?

A. Continuing substance use even when family arguments worsen

B. Using a substance in physically dangerous situations
C. Needing higher doses for the same effect
D. Experiencing withdrawal when not using

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12. Which genetic variation is most likely to reduce risk for alcohol use disorder by causing adverse reactions to alcohol?

A. Dopamine transporter gene variant
B. GABA receptor polymorphism
C. ALDH2 gene variant that slows metabolism causing flushing
D. Prefrontal cortex development gene variant

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13. Which phrase is most appropriate when documenting a newborn experiencing withdrawal from maternal opioid use?

A. Newborn with neonatal opioid withdrawal syndrome
B. Addicted baby
C. Drug-exposed infant
D. Junky neonate

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14. Which term is outdated and likely to perpetuate stigma when referring to substance use disorder?

A. Substance use disorder
B. Person with an SUD
C. Drug misuse
D. Junkie

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15. Which harm reduction strategy helps prevent transmission of bloodborne infections among people who inject drugs?

A. Mandating abstinence programs
B. Providing sterile needle exchange services
C. Restricting access to syringes
D. Removing injection equipment from circulation

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16. Which medication is an opioid antagonist approved to treat both alcohol use disorder and opioid use disorder?

A. Methadone
B. Disulfiram
C. Naltrexone
D. Topiramate

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17. Which patient would be most appropriately referred to an intensive outpatient program (IOP)?

A. Severe use disorder with unstable housing
B. Mild misuse with strong social support
C. Moderate use disorder needing structured daily sessions at home
D. End-stage organ failure requiring acute care

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18. A brief intervention in a primary care clinic begins with personalized feedback and goal setting. This approach exemplifies which technique?

A. Didactic lecture on addiction biology
B. Confrontational advice to quit
C. Nonjudgmental feedback and collaborative planning
D. Immediate referral without discussion

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19. Which is NOT considered a biological risk factor for substance use disorder?

A. Family history of addiction
B. Male sex assigned at birth
C. Co-occurring ADHD
D. Low socioeconomic status

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20. Which example best illustrates a protective biological factor against alcohol use disorder?

A. Early prefrontal cortex development
B. High peer resistance skills
C. Low neighborhood stress
D. ALDH2 variant causing flushing after alcohol

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21. What is the primary goal of cognitive behavioral therapy (CBT) in treating substance use disorders?

A. Eliminate all cravings immediately
B. Address family dynamics only
C. Identify and alter unhelpful thought and behavior patterns related to use
D. Provide group support exclusively

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22. A patient expresses interest in joining Alcoholics Anonymous. Which referral option aligns best with a 12-step program?

A. Peer-led fellowship meetings at a community center
B. Individual CBT sessions at the clinic
C. Voucher-based contingency management
D. Digital self-help app

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23. The extended amygdala in addiction neuroscience is primarily associated with which process?

A. Habit formation
B. Reward sensitivity
C. Executive decision making
D. Stress and negative affect during withdrawal

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24. Which advantage of digital technologies helps deliver substance use interventions at the moment of greatest vulnerability?

A. Replacing all in-person therapy
B. Standardizing pharmacotherapy regimens
C. Reducing the need for professional training
D. Using mobile sensors and machine learning to prompt tailored support

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25. How many DSM-5 criteria define a mild substance use disorder?

A. Two to three criteria
B. Four to five criteria
C. Six or more criteria
D. One criterion

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26. Which statement best describes the relationship between substance use disorders and co-occurring psychiatric disorders?

A. Presence of another mental health disorder almost doubles addiction risk
B. Co-occurrence rarely affects treatment outcomes
C. Substance use always precedes other psychiatric diagnoses
D. They are unrelated conditions

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27. What is a key benefit of office-based buprenorphine maintenance therapy for opioid use disorder?

A. Reduces cravings and withdrawal without producing euphoria
B. Requires daily inpatient administration
C. Causes high levels of sedation
D. Leads to rapid discontinuation

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28. Which statement correctly contrasts LSD and mescaline regarding potency?

A. Mescaline is active at microgram doses, LSD requires milligrams
B. LSD’s effects last days, mescaline’s last hours
C. LSD is potent at microgram doses whereas mescaline requires hundreds of milligrams
D. Mescaline’s potency is higher so lower doses suffice

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29. Which substance is classified as a volatile alkyl nitrite inhalant?

A. Paint thinner
B. Amyl nitrite (poppers)
C. Gasoline
D. Nitrous oxide

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30. Which symptom is characteristic of tobacco withdrawal?

A. Seizures and hallucinations
B. Severe hypotension
C. Irritability and increased appetite
D. Bradycardia and hypothermia

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