CATC Exam Practice Questions: 2015

These practice questions are included within the Certified Addictions Treatment Counselor (CATC) Examination Candidate Handbook, presented by California Association for Alcohol / Drug Educators (CAADE).

Breining Institute recommends that you use these practice questions in conjunction with:

- A solid formal education in addiction studies (which you should have already completed),
- *Intervention, Treatment and Recovery* (2013, Lori L. Phelps, Psy.D.), and
- The Breining Institute online tutorial ([http://breining.edu/catctutorial.htm](http://breining.edu/catctutorial.htm)) that covers important components of the textbooks identified above.

Both textbooks mentioned above are available through the Breining Institute bookstore at this link: [http://breining.edu/Bookstore.htm](http://breining.edu/Bookstore.htm)

If you do better preparing for exams by participating in “live” workshop presentations, we encourage you to visit the CAADE website which has information about such workshop presentations at this link: [http://caade.org/catc-exam-preparation-workshops](http://caade.org/catc-exam-preparation-workshops)

Good luck on the exam!
PRACTICE QUESTIONS

These specific questions will not be on the CATC Exam, but are representative of the types and format of the questions on the examination.

1. A heavy sedative user realizes that it takes a lot of alcohol to get a "buzz". What pharmacological process does this illustrate?
   A. Potentiation
   B. Increased tolerance
   C. Substitution
   D. Paradoxical effect

2. A patient gets drunk with friends once a month. He was arrested twice for DUI. As a result, he missed several days of work due to court appearances and hangovers. Based on this situation, what assessment should be made about this client?
   A. The client is an alcoholic.
   B. The client is an alcohol abuser.
   C. The client is a social drinker.
   D. The client is alcohol dependent.

3. A client with three weeks of abstinence continues to experience extreme hopelessness and despair. Based on this situation, what action must be taken by the counselor?
   A. Tell the psychiatrist to prescribe an anti-depressant
   B. Put the client on suicide watch
   C. Refer the client for a psychiatric assessment
   D. Do nothing since the client may be faking

4. A client speaks rapidly, provides answers that are irrelevant to the questions and experiences depressive episodes. Based on this situation, what action must be taken by the counselor?
   A. Refer client for mental health assessment
   B. Suggest client calls sponsor
   C. Counsel client about "dry drunk" syndrome
   D. Refer client for medical assessment

5. How do methadone maintenance programs contribute to addiction treatment?
   A. By eliminating daily drug use requirements for addicts
   B. By substituting a non-addictive drug for an addictive drug
   C. By curing addicts of their need for heroin
   D. By permitting addicts to abandon criminal lifestyles

6. Which of the following activities enhances service coordination by counselors?
   A. Visit facilities to which referrals are frequently made
   B. Limit outside referrals because clients need to be self-motivated
   C. Take client to outside referral in all cases
   D. Make an outside referral only if there is a crisis
7. What pattern of personality change includes apathy, lack of concern for the future and loss of ambition that occurs in some marijuana users?
   A. Acute brain syndrome
   B. Dysphoric reaction
   C. Amotivational syndrome
   D. Immunosuppressant effect

8. What motivation explains the actions of enablers?
   A. They want the chemical-dependent to be irresponsible.
   B. They are protecting their own security.
   C. They want to get the person more involved in drugs.
   D. They are instrumental in getting the drug dependent person into treatment.

9. Which of the following explanations characterizes a client who has been abstinent from mood altering substances, regularly attends 12-step meetings, but continues to feel irritable and anxious?
   A. The client’s spouse is an untreated codependent.
   B. The client has adjusted to life in recovery.
   C. The client is experiencing post acute abstinence syndrome.
   D. The client is angry because of giving up using.

10. A client informs the counselor of frequent thoughts of suicide and has a plan. The client informed the counselor that the plan will be carried out if the counselor tells anyone. Based on this situation, which of the following actions should be made by the counselor?
    A. Contact the client’s family to conduct an intervention
    B. Ask client to sign a release of information so Psychiatric Evaluation Team can be contacted.
    C. Contact a psychiatric evaluation team for evaluation
    D. Convince the client that the plan is irrational

11. How can a counselor assist an outpatient client who discloses urges to drink?
    A. By scheduling increased A.A. attendance and having the client bring in signed attendance slips
    B. By discussing and validating drinking urges with client and encouraging continued relapse prevention efforts
    C. By challenging the client about behaviors that prompted the urges and giving client educational information
    D. By suggesting that the client may require referral to an inpatient program for a short-term stay
12. During an intake interview, discrepancies in statements by the client indicate denial. Which of the following statements would enable the counselor to expose the client's denial using motivational interviewing?
   A. "I am not sure I understand, can you tell me again why this in not a problem?"
   B. "Your addiction is causing you to be in denial of the problem."
   C. "I know you are lying."
   D. "First you tell me one thing and then another. Which is really the truth?"

13. Which of the following statements would be appropriate to use in determining whether or not an individual is in a crisis?
   A. "Describe your present mood."
   B. "Describe your eating and sleeping habits."
   C. "Have you thought of harming yourself?"
   D. "Tell me about any changes in your lifestyle."

14. What is the rationale for Harm Reduction regarding "responsible drug use"?
   A. Substitutions of various activities for using drugs
   B. Early intervention to prevent drug dependency
   C. Less negative consequences due to using drugs
   D. Abstention from drug use in all circumstances

15. A client has been hospitalized on a 72-hour hold after threatening to commit suicide. What should be included in the client’s file regarding the incident?
   A. The counselor's personal opinions and feelings about the reason for the client’s suicidality
   B. A special form for 5150's which should be completed and filed with the treatment plan
   C. The specifics of the incident, including what the client said and did and what the counselor did
   D. Because of confidentiality regarding suicide, only code words should be used to record the event

16. A counselor, in reviewing a client file, discovers a mistake in a section of the case notes. What action should be taken by the counselor?
   A. Leave the mistake unaltered and write a correction later on in the file
   B. Use "white-out" to cover the original and write the corrected notes over the "white-out"
   C. Make a line through the mistake, date and initial it and date the correction
   D. Erase the mistake, write the correct details and date and initial the changes

17. If a client is experiencing difficulties conforming to the rules and expectations of the program, what action should be taken by the counselor?
   A. Cancel the client's next individual and group counseling sessions
   B. Notify the client's family of the misbehavior
   C. Refer the client to the agency psychiatrist or medical director
   D. Consult with supervisor or other members of the treatment team
18. A 15-year-old girl appears emaciated, her mood fluctuates and she admits that she has been using drugs. Based on this situation, what action should be taken by the counselor?
   A. Assess for substance abuse
   B. Report the situation to Child Protective Services
   C. Refer her to a shelter
   D. Call the police

19. How should alcohol and drug counselors maintain ethical standards in professional conduct?
   A. By seeking ongoing substance abuse education
   B. By obtaining national certification
   C. By supporting peer assistance programs
   D. By receiving personal therapy

20. When may information about a client be shared among staff within a program?
   A. Only if the staff are providing consultation services
   B. Only during the course of stay in the program
   C. Only during clinical team meeting and supervision
   D. Only with a signed release of information