

## II. How to Take the Examination

**PLEASE NOTE** – Some of these suggestions are based on the paper and pencil exam. If you are sitting for the computer based exam, be sure to read all of the information that your Board will provide you prior to arriving at the testing location.

### 1. **Start with a Positive Mental Attitude**

Be prepared emotionally and physically as well as intellectually. Get into a "fighting" attitude, emotionally ready to do your best. Stay away from others right before the test. Anxiety is highly contagious. Focus on what you know rather than on what you do not know: Reinforce your strengths and arrest your weaknesses. Get your rest the night before a test, eat well balanced meals, keep up with your regular exercise - prepare your brain for optimum functioning by keeping your physical resources well maintained.

Avoid fasts, do not take any stimulants you are not used to, and if you are used to them (i.e. coffee or soft drinks) keep within moderate amounts - a little caffeine may increase your mental alertness, but too much may make you nervous and jittery.

### 2. **Arrive Early at Testing Site**

Arrive at the test site early enough to arrange your working conditions, establishing a calm and alert mode. The paper and pencil exam will be scheduled for a specific starting time - they will not wait for you to begin and you will not be allowed to enter after the exam has started. (With the computer based exam, you will be expected to begin at the time that you have scheduled for this exam.) Select a seat where the lighting is the best (frequently in the front of the room) and where your view of other students will be minimized. Wear comfortable, layered clothing - if you get too hot or too cold you can adjust your comfort level. Avoid sitting on the aisle or near a window - do not sit close to the door, do not sit next to a friend or acquaintance.

Be sure to wear a watch and bring plenty of pencils and erasers if taking the paper and pencil exam.

3. **Listen Carefully to Instructions**

Carefully listen to directions given by the test proctor at your testing location. This is the time to ask any questions or to clarify instructions.

4. **Check Your Test**

Preview the whole test before beginning to answer any questions. Make sure your copy has no missing or duplicate pages. Ask the instructor or proctor to clarify any ambiguities. Read the directions carefully.

5. **Plan Your Time.**

Time management is a critical part of successfully navigating a multiple-choice examination of this size. As such, we strongly recommend that you consider dividing the test questions into smaller sections and allocate smaller amounts of time per section, leaving thirty minutes at the end to finalize your work.

For the American Academy's exam, we recommend the following:

SECTION	QUESTIONS	TIME
1	1-50	45 minutes
2	51-100	45 minutes
3	101-150	45 minutes

For the IC&RC written/CBT test format, we recommend the following:

SECTION	QUESTIONS	TIME (Written)	TIME (CBT)
1	1-50	60 minutes	50 minutes
2	51-100	60 minutes	50 minutes
3	101-150	60 minutes	50 minutes

For NAADAC's exam, we recommend the following:

SECTION	QUESTIONS	TIME
1	1-50	40 minutes
2	51-100	40 minutes
3	101-150	40 minutes
4	151-200	40 minutes
5	201-250	40 minutes



Breaking the test in to smaller segments allows you to spend upwards of forty-five to sixty seconds on each of the questions. In reality, this is actually a great deal of time. One way to experience this for yourself is to time how long it takes you to answer questions from the sample exam in the back of this manual. Most people will discover that on average it may take 30-40 seconds to read the question, comprehend what the question is asking you to answer, read each of the four choices, then select your BEST response. Section 4 for the IC&RC exam still allows you 30 minutes for the smaller number of questions (30 for the CBT), but keep in mind that you will also need to read each vignette provided before you even attempt to answer these questions.

If you are taking your exam in a written format, this still allows you ample time at the very end of the test to review any questions you still have not answered (and guess if all else fails), and then transfer your answers to the answer sheet. We encourage this to help you avoid any erasure marks on the answer sheet, which can be problematic as the answer sheet is computer scored. With the computer based exams, the test is formatted to show you any questions that you have not yet answered, so put any of your "unused" time to review those questions and give it your best shot in answering them.

## **6. Make Use of Deep Breathing**

Periods of intense concentration can result in shallow breathing. This, in turn, will result in lowering the amount of oxygen that reaches the brain. Oxygen feeds the brain, removes waste build-up (like carbon dioxide), and helps us concentrate AND access long-term memories. So it is important to use deep breathing periodically while taking the exam. We recommend that you use at least four or five repetitions of deep breathing before you start your exam and before you proceed to each section of the exam, as outlined in #5 above. This means "belly" breathing – here's how it's done.

Sit in a straight, upright position. Now close your eyes and slowly inhale through your nose. Fill your lungs from the bottom to the top, using the muscles of your stomach to pull down the lower lobe of the lungs. Do this by exaggerating the extension of your stomach (stick that gut out!). Once you have inhaled fully, lift your shoulders to fill the very top portion of your lungs. Hold this breath for a count of two, and then slowly and quietly exhale through your nose. Repeat slowly four or five additional times. "Slowly" is the key – too fast and you'll hyperventilate and pass out!

You may notice that your brain begins to tingle, and you'll feel refreshed and calm. **The end result – improved thought processing and memory recall.**

7. **Answer “Easy” Questions First**

Go completely through the test, answering those questions you obviously know, and mark those you don't. (The computer based exam will keep track of unanswered questions for you) This is a great way to build your confidence and to gain time for the harder ones. Don't spend too much time on any one question. Skip difficult questions (but clearly mark them in the book for the paper and pencil exam) and come back to them later.

8. **Read Slowly and Completely**

Be sure that you read each question thoroughly, as well as each of the responses. Know what the question is asking you. Avoid overanalyzing or oversimplifying, or you will end up answering a question that exists only in your mind, not on the grading key.

9. **Read All the Answers**

Never select a response until you have read all of the choices. Keep in mind that the instructions will be for you to answer “the BEST possible response” – this could mean that there is more than one CORRECT response, but only one is the BEST.

10. **Don't Expect to Know ALL the Answers**

Do not panic if you see a question you did not anticipate or prepare for. Use everything you know about the content of the course, the proctor's explanations and your own reasoning ability to analyze the questions and create a logical answer. **If you have studied, you are bound to know something.**

11. **Budget Your Time**

Once you have gone through the test for the first time, check your time. Now budget your remaining time according to the number of questions you still need to answer.

12. **Avoid Changing Answers**

Work only on those questions you have not answered. Avoid returning to those that you have answered. It is well documented that students typically talk themselves out of a right answer when they attempt to review them. Trust your first response, especially if you found an answer came to you with ease.



**13. Use the Process of Elimination**

In taking the test, you may find it helpful to eliminate obviously incorrect responses after the first reading so as to increase the probability of selecting the best responses. Eliminate obviously wrong answers, partially wrong answers, and answers that are correct statements but have nothing to do with the question being asked. If you determine that there are two or more reasonable options, you should select the most plausible choice. There is no penalty in the scoring formula for guessing.

If two answers appear to be correct and are similar, determine in what ways the answers are different and how that difference makes one response correct and the other incorrect. Pay attention to other questions that may give you clues to unanswered questions. If all else fails, **guess**. An answer left blank is automatically wrong, but guessing will give you the potential of collecting the point if you guess right.

**14. Don't Let Others Intimidate You**

If you are taking the paper and pencil exam, or if you happen to be sitting for the computer based exam with others in the room, don't be intimidated by others who finish their test sooner than you do. **Someone always has to finish first when taking an exam!** Some people have better test taking skills than others. Some may have actually given up with no hope of passing. Regardless, stick to your own testing skills. There is no reward for finishing early, and no penalty for using all of the allotted time.

**15. Be Careful Using Answer Sheet**

As noted previously, if you are taking the paper and pencil exam we recommend that you wait until you have answered all of your test questions before transferring the answers to your answer sheet. Mark your responses in the test booklet first, and then put them on the answer sheet. Transfer your answers to the answer sheet **carefully**. Check your numbering every ten responses to insure that you haven't made any mistakes. Remember: Your answers are computer scored and the computer doesn't care if you made a mistake in transferring your answers to the answer sheet. Computers have no guilt if you goof up!

If you are doing the computer based exam, the system will allow you to view answered and unanswered questions. Be sure that you **DO NOT** submit your test for scoring if there are unanswered questions.

## How to Use Section 4, Chapter 2

Student feedback tells us that sample exam questions are one of the most valuable tools in preparing for their actual credentialing examination. Having the opportunity to test knowledge and recall, as well as the opportunity of using test taking skills can help to pinpoint areas of need, whether that is the need to review specific areas of study or to highlight test taking mechanics and the impact mechanics have on successfully answering a question. So we have include 150 sample questions (3, 50-question samples) to assist you in your preparation

The test questions in this manual are representative of the knowledge that the various credentialing bodies use in constructing their examinations. They are **NOT actual test questions from the American Academy, IC&RC or NAADAC exams**. They are intended to assist you in assessing your own knowledge and understanding of information regarding the chemical dependency profession. Because a larger number of states and countries use the IC&RC exam, this format (150 questions) is used in the following sample examination. An answer key is found at the back of the section, allowing you to self-score your exams.

One valuable use of this sample examination is to allow you to experience what it is truly like to sit down and take a very lengthy, multiple choice examination. Many candidates taking these exams are typically adult learners, who may not have experienced such testing for many years. Seeing such an exam prior to the actual testing, plus experiencing what it is like to sit still for up to three and one-half hours can be an important step for you prior to the exam.

Find time to sit down and take the all three sample examinations in one sitting. Note your starting and ending times so you can begin to judge the speed and efficiency that you will need to answer questions when you actually sit for your credentialing exam. Once you have completed all the questions, go to Section 4, Chapter 3 of the manual and check your responses. Then check your score - your goal is to obtain a score of at least 35 out of the possible 50 exam questions for each sample – the more the better! Then focus your attention on any missed questions and ask yourself “did I miss this question because I did not know the information, or did I make an error due to my test taking skills?”

If you miss a question because you did not know or could not remember the information, then you will want to spend some time with the content materials in this study guide to refresh your knowledge. If you miss a question because of poor test taking skills, then concentrate more with Section 4 test taking tips.



## A Final Word

After many hours of education and "in field" training, have faith in the knowledge you have obtained in working towards your credentials. Many test candidates tend to overlook the time and effort they have given to reach the point of testing. Instead of believing in themselves and calling upon the knowledge and skills learned in their training, they focus only on the exam itself. Many panic and think, "I don't know if I can pass this test!" **Trust your skills.** Don't try to cram many years of training into a few short weeks of review. Instead, use review materials like those found in this manual (and especially the sample exam) to help pinpoint your areas of strength and weakness. Then use your time to review what you need help in - not what you already know.

We wish you the best of luck when sitting for your exam, and let us be the first to congratulate you on reaching this point in your professional development.

## Section 4, Chapter 2:

### Sample Written Examination #1

Read each of the following questions. Then choose the BEST response to each question. Place your answer on a separate piece of paper. Be sure each response is numbered. Once completed, turn to Chapter 3 of this section and score your examination.

1. Which of the following is the BEST definition of insight?
  - a. A problem-solving strategy involving the elimination of unworkable solutions
  - b. A sudden understanding of self, or realization of how a problem can be solved
  - c. A Freudian defense mechanism that is used unconsciously but not maliciously
  - d. A confrontation technique used in conjunction with Gestalt therapy
  
2. MAT refers to:
  - a. a common screening tool for alcoholism.
  - b. a lengthy personality inventory used to identify gross psychopathology.
  - c. the use of medications such as suboxone in the treatment of addiction.
  - d. a nonmedical detox protocol.
  
3. Aisha has completed her treatment at an in-patient facility and is ready to be discharged. She has asked her counselor to recommend a therapist to work with her and her husband on an out-patient basis. This process is BEST viewed as an example of:
  - a. a referral.
  - b. a consultation.
  - c. case management.
  - d. an aftercare plan.



*Written Sample Examinations*

4. Which type of therapy is most directive, offering the greatest potential for abuse of power by the counselor?
  - a. Adlerian
  - b. Rational-emotive
  - c. Gestalt
  - d. Person-centered
  
5. The primary purpose of professional credentialing for counselors is to:
  - a. advance the field by ensuring that counselors are recognized as dignified professionals.
  - b. ensure that counselors share and understand the accepted philosophies of practice.
  - c. protect public safety by ensuring that counselors meet minimum standards of competency.
  - d. ensure that counselors receiving third-party payments have professional credentials.
  
6. Which of the following is NOT a CNS depressant?
  - a. Alcohol
  - b. Xanax
  - c. Nembutal
  - d. Benzedrine
  
7. The concept of informed consent requires that before agreeing to accept treatment, clients should know their rights and obligations, therapeutic goals, fees for services and \_\_\_\_\_.
  - a. availability of referral services
  - b. community resources to be used
  - c. with whom they will be participating in group activities
  - d. the limits of their confidentiality
  
8. Attitudes, policies, and practices that are destructive to other cultures and their members are examples of lack of cultural \_\_\_\_\_.
  - a. blindness
  - b. competence
  - c. destructiveness
  - d. incapacity

9. Restlessness, nervousness, flushed face, muscle twitching, tachycardia or cardiac arrhythmia are all signs or symptoms of:
- caffeine intoxication.
  - cocaine intoxication.
  - alcohol intoxication.
  - opioid Intoxication.
10. Of all of the possible substance use disorders, which one is typically not seen in older children or adults?
- Cannabis Use Disorder
  - Inhalant Use Disorder
  - Tobacco Use Disorder
  - Caffeine Use Disorder
11. Needle exchange programs can BEST be described as:
- a nonabstinence technique.
  - harm reduction.
  - a maintenance method.
  - a community organization intervention.
12. Autonomic hyperactivity, hand tremor, nausea or vomiting, psychomotor agitation, grand mal seizures are all signs or symptoms of:
- cannabis withdrawal.
  - cocaine withdrawal.
  - sedative, hypnotic, or anxiolytic withdrawal.
  - opioid withdrawal.
13. Among other things, \_\_\_\_\_ involves making a client aware of resources in the community, as well as providing information related to substance abuse, HIV/AIDS and other STDs.
- case management
  - referral
  - client education
  - consultation



*Written Sample Examinations*

14. In the United States, the population that experiences the lowest prevalence of alcohol use disorder is:
- Caucasian men.
  - adult women.
  - Native Americans.
  - Asian Americans and Pacific Islanders.
15. Classical and operant conditioning are associated with \_\_\_\_\_ therapy.
- cognitive
  - behavior
  - gestalt
  - person-centered
16. Eric has admitted being sexually active without using any type of protection against sexually transmitted diseases. His counselor has made an appointment for him to be tested for the HIV virus. He then made arrangements for Eric to be transported to the clinic. Facilitating this appointment is BEST described as:
- consultation.
  - case management.
  - client education.
  - ethical responsibility.
17. Studies indicate that counseling is most effective when:
- culture and values are taken into account.
  - the counselor relies on humanistic methods.
  - the therapist and the client come from similar backgrounds.
  - a therapeutic contract is clarified in the first session.
18. One basic principle of documentation requires the counselor to:
- describe events as vaguely as possible in case records are requested for a court case.
  - describe events in objective terms, using measurable language that can be easily understood.
  - only document group notes, because any twelve step work is not counseling.
  - document emotions based only on what the client reports, because the counselor's assessment will always be subjective.

19. The \_\_\_\_\_ model of addiction explains addiction as a consequence of personal choice.
- disease
  - moral
  - social
  - sociocultural
20. How does solution-focused brief therapy differ from many of the other approaches to counseling?
- Emphasis is placed on the present and future while devaluing the past.
  - It emphasizes the use of more abstract techniques, such as empty chair.
  - Greater attention is paid to the particular pathology and associated problems.
  - More time is spent attempting to understand the problem.
21. Case reviews:
- encourage the sharing of information.
  - promote client growth.
  - allow the client the opportunity to offer feedback.
  - enable the counselor to assess progress and make any necessary changes in the treatment plan.
22. The tendency of the family to try and maintain balance when dealing with a loved one's substance use disorder is called:
- equilibrium.
  - stability.
  - homeostasis.
  - accommodation.
23. Your client expresses growing feelings of rage. He has recurring nightmares in which he attacks random women on the street. If you followed through with what you believed was a duty to warn, under what circumstances would you be least likely to be disciplined?
- If the nightmares had escalate in intensity
  - If the client was already a convicted criminal
  - If the client refuses to answer questions about violent behavior
  - If the client discloses the name of a person he plans to harm



24. In his second counseling session, a client reveals to the counselor that he is gay. Having never worked with a member of this special population, the counselor's BEST course of action is to:
- inform the client of his lack of knowledge of the gay community and commitment to learn.
  - offer to refer the client to someone with experience in with special issues associated with the gay community.
  - send the client a letter informing him that he has been transferred to another counselor's caseload.
  - say nothing because counseling should be value-neutral anyway.
25. Determining a client's eligibility and appropriateness for treatment occurs during the \_\_\_\_\_ process.
- intake
  - assessment
  - admission
  - screening
26. Highly structured daily routines, a system of rewards and punishments, and frequent group confrontation are characteristics of:
- intensive out-patient treatment.
  - therapeutic communities.
  - any primary care setting.
  - gestalt therapy.
27. Collateral interviews:
- involve asking significant others about their opinions as to whether or not a person has a substance abuse or dependency problem.
  - do not require release of information documents if the information is voluntarily given.
  - involve gathering information from other persons who are, or have been, associated with the person being assessed.
  - should only be done with immediate family members and no one else.

28. A major criticism of the \_\_\_\_\_ is that the questions are so obvious that this test cannot possibly detect alcoholics who deny having a problem.
- MAST
  - ASI
  - SASSI
  - POSIT
29. The goal of complete abstinence is most consistent with the \_\_\_\_\_ model of addiction.
- moral
  - disease
  - sociocultural
  - psychological
30. \_\_\_\_\_ can develop between natural and synthetic opiates, but not between opiates and CNS depressants.
- Nonsynergistic interaction
  - Gestalt
  - Cross tolerance
  - Negative symptoms
31. Appropriate treatment goals must be:
- observable and measurable, in order to facilitate monitoring progress.
  - typed and signed in order to ensure compliance by an unwilling client.
  - written in the order that they will be addressed in treatment.
  - finalized by the time the client is admitted for services.
32. When is confrontation probably least appropriate?
- Prior to establishing rapport with the client
  - When directed at the client's strengths
  - When addressed to specific aspects of a client's behavior
  - When used to point out a discrepancy between a client's verbal statements and his or her behavior



*Written Sample Examinations*

33. The goal of screening is to:

- a. provide clients with an opportunity to discuss their past problems.
- b. determine whether a client is appropriate and eligible for a particular treatment service.
- c. gathering some general information about the future goals of the potential client.
- d. assign a counselor who fits the client's personality best.

34. \_\_\_\_\_ drugs are used to treat mental disorders.

- a. Psychoactive
- b. Psychotropic
- c. Psychosomatic
- d. Psychointeractive

35. Jamal believes that he has everything he will ever need materially and financially, so he has decided to devote his time to music and other creative outlets for self-expression. Jamal's motivation is best accounted for by:

- a. psychoanalytic theory.
- b. homeostatic considerations.
- c. humanistic theories.
- d. biological factors.

36. The idea that people have an in-born desire to self-actualize is associated with:

- a. psychoanalytic theory.
- b. humanistic theory.
- c. cognitive-behaviorism.
- d. classical conditioning.

37. Methadone, Tramadol and Morphine are all \_\_\_\_\_.

- a. Schedule V drugs
- b. CNS stimulants
- c. barbiturates
- d. opiates

38. The central focus or "charge" of the twelfth step of Alcoholics anonymous is:
- service to others.
  - relapse prevention.
  - abstinence.
  - making amends to others.
39. A counselor's personal values:
- should never show lest they cause a client's decisions to be biased.
  - should be disclosed in order to influence the client to make healthier decisions.
  - are irrelevant to the counseling process.
  - are communicated through the therapeutic goals they offer and how they attempt to reach those goals with the client.
40. Nonmaleficence is the ethical principle that means:
- show unconditional positive regard.
  - show equal respect for gender.
  - do no harm.
  - respect confidentiality.
41. \_\_\_\_\_ interventions have been developed or are being sought to block the effects of abused drugs, reduce cravings for drugs and block the toxic effects of drugs.
- Socially acceptable
  - Pharmacological
  - Biological
  - Free
42. The terminology now being used in the DSM-5 for diagnostic categories is:
- Substance Abuse Disorders.
  - Substance Dependence Disorders.
  - Substance Use Disorders.
  - Substance Addictive Disorders.



43. Which statement BEST describes the relevance of counselor self-exploration?
- The counselor's personal identity should not be disclosed to the client because of the risk of transference.
  - Counselors can benefit greatly from being clients themselves, at some point.
  - Counselors who are in therapy themselves are putting their own clients at risk.
  - Counselors learn what is most important by helping other people.
44. \_\_\_\_\_ is the term used to describe the mental activities involved in acquiring, retaining and using any type of knowledge.
- Thinking
  - Memory
  - Cognition
  - Perception
45. In the DSM-5, for a substance use disorder severity indicator of mild, how many criteria must be present?
- Two to three
  - Four to five
  - Five to six
  - Six or more
46. In which situation is it acceptable to release confidential information without prior consent from the client?
- When the client has a sexually transmitted disease.
  - If law enforcement officials request information in writing.
  - After learning that a client was once involved in a crime.
  - When the client admits to abusing a child.
47. Substance \_\_\_\_\_ is a syndrome that develops temporarily after ingestion of a psychoactive substance.
- withdrawal
  - overdose
  - intoxication
  - anhedonia

USE THE FOLLOWING VIGNETTE TO ANSWER QUESTIONS 48 – 50

Toya is a 35 year old African American woman who has brought her toddler to the Emergency Room with her. The baby is lethargic and irritable. The mother states that she doesn't know what is wrong with the baby. The mother seems erratic, herself. The E.R. doctor has called you in to consult on the mother, while he treats the child. In the course of your conversation, you learn that the mother takes valium every day because she "has nerves." She insists that it isn't a problem. Later you learn that the baby apparently found his mother's valium and managed to swallow a couple of pills. The father, an African American male, age 36 arrives and says he thinks his wife is addicted, however he won't even make eye contact with you.

48. During your interview with the mother, she has insisted she doesn't have a problem. What should you do?
- Thank her for her time and give her your contact information in case she changes her mind.
  - Talk with the husband about planning an intervention, using other family and friends to assist.
  - Seek a court commitment for a more detailed evaluation.
49. Do you have a responsibility to report the incident involving the child to authorities?
- Yes, because the child was put in danger because of the mother's addiction.
  - No, because the doctor told you that it was only a minor incident and to let it go this time.
  - Yes, because the husband's lack of eye contact hints at evasiveness of a larger problem.
50. The father stated that his wife was an addict and needed help, but he could not seem to make eye contact. What does this suggest?
- The father is covering up his involvement; the lack of eye contact hints at dishonesty.
  - The lack of eye contact suggests he is not really willing to let his wife seek treatment.
  - Perhaps nothing, since some cultures view direct eye contact as disrespectful.



## Sample Written Examination #2

Read each of the following questions. Then choose the BEST response to each question. Place your answer on a separate piece of paper. Be sure each response is numbered. Once completed, turn to Chapter 3 of this section and score your examination.

1. "Referral" means:
  - a. assisting a client to utilize the support systems and community resources available.
  - b. identifying and ranking problems.
  - c. meeting with other professionals for discussions and planning.
  - d. attending an A.A. or N.A. meeting with a client.
  
2. \_\_\_\_\_ are a problem associated with consuming alcohol and valium together.
  - a. Synergistic effects
  - b. Tremors
  - c. Cross allergic reactions
  - d. Negative symptoms
  
3. \_\_\_\_\_ is the belief that one's own culture is superior to others.
  - a. Reverse racism
  - b. Ethnocentrism
  - c. Nationalism
  - d. Cultural realism
  
4. "Excessive use of alcohol is a result of personal choice and therefore should be punished." This statement is consistent with the \_\_\_\_\_ model of addiction.
  - a. disease
  - b. moral
  - c. social
  - d. sociocultural

5. A common problem for beginning counselors is:
- trying to use a variety of techniques, rather than becoming skilled at one approach.
  - failing to identify an approach that is appropriate to the client.
  - their bias against working with clients who have a dual diagnosis.
  - that they allow for conflicting values to exist in the counseling relationship.
6. A counselor wants to record a counseling session with a client so that the counselor could listen to the tape, along with her supervisor, as part of ongoing training. According to ethical best practices, the counselor's plans are:
- ethical.
  - unethical.
  - ethical, as long as the client granted permission beforehand.
  - unethical, unless the supervisor observes the session.
7. A major criticism of self-report instruments is that the questions are so obvious that these tests cannot possibly detect alcoholics who deny having a problem. This issue is the dilemma of \_\_\_\_\_ questions.
- measurable
  - face valid
  - multi-factor
  - analytical
8. A mental status exam does NOT assess:
- education level.
  - appearance.
  - speech.
  - thought processes.
9. Abstinence is to harm reduction as:
- IV drug use is to drinking.
  - controlled drinking is to willpower.
  - Alcoholics Anonymous is to needle exchange.
  - Methadone is to Antabuse.

10. Appropriate treatment goals must be:

- a. stated generally, in order to encourage small progress.
- b. typed and signed in order to ensure compliance by an unwilling client.
- c. written in the order that they will be addressed in treatment.
- d. agreed upon by the client and counselor.

11. Arbitrary inferences and selective abstractions are examples of.

- a. cognitive distortions.
- b. defense mechanisms.
- c. attention-seeking.
- d. developmental difficulties.

12. Beneficence is the ethical principle that means:

- a. help.
- b. show equal respect for gender.
- c. do no harm.
- d. respect confidentiality.

13. Client education on HIV and other sexually transmitted diseases:

- a. is only done at the request of the client.
- b. should be given in specialty groups to those clients that are considered "high risk" to protect confidentiality.
- c. should be contracted out to a physician or professional medical personnel who have expertise in this area.
- d. is important information to incorporate in the treatment process of every client.

14. Completing necessary documentation for admission to a particular treatment program occurs during the \_\_\_\_\_ process.

- a. intake
- b. assessment
- c. admission
- d. screening



*Written Sample Examinations*

15. Concise and accurate reporting is necessary in order to:

- a. assist in client education.
- b. ensure continuity of client care.
- c. identify client strengths and weaknesses.
- d. demonstrate counselor competence.

16. Counselor self-disclosure is BEST limited to:

- a. the time when the client is ready for discharge.
- b. ideas and emotional reactions in the counseling session.
- c. early childhood experiences.
- d. opinions the counselor has about the client and his or her family.

17. Drowsiness or coma, slurred speech, impairment in attention or memory are all signs or symptoms of:

- a. caffeine Intoxication.
- b. cocaine Intoxication.
- c. alcohol Intoxication.
- d. opioid intoxication.

18. Generally, the Tarasoff requirement has been interpreted as:

- a. a duty to hospitalize or otherwise confine the person making the threat.
- b. a duty to make a reasonable effort to prevent the patient from carrying out the threat.
- c. a duty to warn the client of possible consequences.
- d. a duty to warn the intended victim and/or the police.

19. In his second counseling session, a client reveals to the counselor that he is HIV positive. The counselor's BEST course of action is to:

- a. discharge the client as a precautionary measure against infecting other clients.
- b. offer to refer the client to a counselor with AIDS, since that counselor will understand the special issues involved.
- c. send the client a letter informing him that he will be transferred to another facility.
- d. discuss the client's case with a clinical supervisor in order to meet the needs of this client.

20. In which situation is it NOT acceptable to release confidential information without prior consent from the client?
- when the client has stolen property from the treatment facility.
  - if law enforcement officials request information in writing.
  - if the client is in a serious accident requiring medical care.
  - when the client admits to abusing a child.
21. Jackie is recently discharged from the Air Force. His counselor suspects that he has PTSD, due to his experiences during active duty in Afghanistan. The counselor contacted the Veteran's Administration and located a clinic in the area with special groups for Vets with PTSD. The counselor then made arrangements for Jackie to be attend these groups while he is still in primary treatment for substance abuse. The counselor's actions are BEST described as:
- consultation.
  - case management.
  - client education
  - ethical responsibility.
22. Methadone maintenance programs can BEST be described as:
- continued substance abuse in disguise.
  - harm reduction focused.
  - a secular recovery method.
  - a community organization intervention.
23. Niko is a client who has been gaining weight steadily since entering treatment. When confronted about his constant snacking and lack of activity, he told his counselor that he needed to eat this way in order to keep his mind off of his drug of choice. He felt that he deserved to indulge, since he was giving up the primary source of satisfaction he had used for years. The counselor would rightly conclude that the ego defense mechanism of \_\_\_\_\_ is at work here.
- reaction formation
  - denial
  - projection
  - rationalization

24. One basic principle of documentation requires the counselor to:
- describe events in as much detail as possible in case records are requested for a court case.
  - record material in a manner that allows a new counselor to understand the general progress of any client.
  - record all incoming and outgoing phone calls by clients, as these calls may have bearing on the client's emotional state during treatment.
  - document only a client's behavior and refrain from any interpretation of that behavior that can be construed as subjective.
25. Rajish is avoiding social situations which involve drinking or drugs. He is worried that others may encourage him to drink. The counselor suggests that they act-out such a situation in order to develop responses if such a situation arises. This counseling technique is:
- practicing the use of "I" messages.
  - cognitive restructuring.
  - empty chair.
  - role-play.
26. Rates of opioid use are higher in \_\_\_\_\_ than in \_\_\_\_\_.
- males; females
  - adults; adolescents
  - Asian Americans; African Americans
  - geriatric populations; adolescent populations
27. Reinforcement and punishment are associated with \_\_\_\_\_ Therapy.
- Cognitive
  - Behavior
  - Gestalt
  - Person-centered
28. Some researchers have concluded that no one pattern of dysfunctional substance abuse exists. They also conclude that there is more than one personality type that happens to be more prone to addiction than some others. This multivariate focus is MOST consistent with the:
- medical model.
  - biopsychosocial model.
  - multimodal model.
  - disease concept.



29. Studies have linked substance abuse among African Americans to three factors: economic deprivation, stress and \_\_\_\_\_.
- a. availability
  - b. racism
  - c. cultural norms
  - d. machismo
30. The concept of informed consent requires that before agreeing to accept treatment, clients should know \_\_\_\_\_, their rights and obligations, fees for services and limits of confidentiality.
- a. availability of referral services
  - b. community resources to be used
  - c. with whom they will be participating in group activities
  - d. the goals of therapy
31. The cultural philosophy of "noninterference" is associated with alcohol-related problems among:
- a. Native Americans.
  - b. Hispanic Americans.
  - c. African Americans.
  - d. Asian Americans.
32. The DSM-5 includes criteria sets specific to intoxication for each substance category except for \_\_\_\_\_.
- a. marijuana
  - b. cocaine
  - c. inhalants
  - d. tobacco
33. The first step of Alcoholics Anonymous requires:
- a. an admission that one's life is unmanageable.
  - b. the acceptance of willpower as central to recovery.
  - c. a commitment to help others in recovery.
  - d. making amends to others.

34. The initial stage of crisis intervention involves:
- identifying relapse triggers.
  - confronting the crisis.
  - recognizing the crisis.
  - determining a solution.
35. The primary goal of a mental status exam is to measure the client's orientation to \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_.
- reality; fantasy; future
  - problems; needs; goals
  - emotions; thoughts; ideas
  - person; place; time
36. The primary principles behind Alcoholics Anonymous are spirituality, self-improvement and \_\_\_\_\_.
- personal empowerment
  - service to others
  - a healthy lifestyle
  - problem solving
37. Which core function of counseling is related to the term "didactic?"
- Case management
  - Referral
  - Client education
  - Consultation
38. Which neurotransmitter is most closely associated with feelings of well-being, appetite and mental alertness?
- GABA
  - Acetylcholine
  - Serotonin
  - Norepinephrine
39. Which of the following is a CNS depressant?
- Xanax
  - nicotine
  - Adderall
  - Benzedrine

40. Which of the following is an SSRI?
- a. Cylert
  - b. Ritalin
  - c. Prozac
  - d. Valium
41. Which of the following is most closely associated with involuntary confinement, such as a prison setting?
- a. Intensive out-patient treatment
  - b. The therapeutic community
  - c. Al-anon
  - d. Gestalt therapy
42. Which of the following is the BEST definition of a “slip”?
- a. an episode of substance abuse following a period of abstinence
  - b. a return to a pattern of substance abuse following treatment
  - c. returning to unhealthy patterns of substance abuse following a period of sobriety
  - d. a lengthy period of relapse
43. Which of the following is the BEST definition of denial?
- a. A coping strategy involving the elimination of unwanted thoughts
  - b. A sudden understanding of self, or realization of how a problem can be solved
  - c. An ego defense mechanism that allows one to pretend a problem is not real
  - d. A confrontation technique used in conjunction with Gestalt therapy
44. Which of these is the BEST example of a substance-induced disorder?
- a. Alcohol tolerance
  - b. Methamphetamine psychosis
  - c. Alcohol withdrawal
  - d. Methadone dependence



45. Which statement is TRUE regarding counselor self-exploration?
- a. The counselor's personal issues should be disclosed to the client in order to encourage transference.
  - b. Counselors should not rule out therapy for their own personal issues.
  - c. Counselor self-exploration put the clients at risk for counter-transference.
  - d. Counselors best help themselves by helping other people.
46. With the new DSM-5 nomenclature, clinicians will now specify severity of the addiction using ratings of:
- a. mild, moderate, and severe.
  - b. occasional, continuous, and binge.
  - c. mild, modest, and aggressive.
  - d. use, misuse, and abuse.
47. You are seeing a patient whom you suspect may be suicidal. Which of the following factors most suggests that the risk of suicide is high?
- a. The patient is an African-American
  - b. The patient is experiencing a mid-life crisis
  - c. The patient is a female
  - d. The patient's depressive symptoms have recently improved

USE THE FOLLOWING VIGNETTE TO ANSWER QUESTIONS 48 – 50

Michael is a 25 year old man who has been your client for several weeks in an out-patient program. He recently came to you and admitted during a group session that he relapsed and had been involved in a hit & run car accident. Michael told the group he had to get it off his chest in a "safe, confidential place." Later, from the news, you learn that there was a hit & run accident that involved the death of the other driver and police are still searching for the individual who fled the scene.

48. Your first responsibility is to:
- Insist that the client turn himself in.
  - Report to the authorities that you know the identity of the driver of the car.
  - Assess the client's current status and re-screen him for transfer to an inpatient program.
49. A police officer visits your office and asks you for your records because someone told him, that your client admitted to a crime during a group session. You should:
- Neither confirm nor deny that Michael is your client because he has not signed a release.
  - Give the information to the officer because this is a current criminal investigation.
  - Admit that Michael is your client, but refuse to turn over records of his admissions in group.
50. Do you have an obligation to report your client's accident involvement to the police?
- Yes, because this is a capital crime, meaning you could be subpoenaed.
  - Yes, because this is a current investigation while the client was under your care.
  - No, because it is a past crime and there is no court order requiring you to disclose anything.

## Sample Written Examination #3

Read each of the following questions. Then choose the BEST response to each question. Place your answer on a separate piece of paper. Be sure each response is numbered. Once completed, turn to Chapter 3 of this section and score your examination.

1. Which of the following is the BEST definition of a “relapse”?
  - a. An episode of substance abuse following a period of abstinence
  - b. The return to a pattern of substance abuse following treatment
  - c. Returning to unhealthy patterns of substance abuse following a period of sobriety
  - d. A lengthy period of recovery followed by a brief slip
  
2. When a drug initiates a physiological response when attaching to a receptor site in the brain, it is BEST classified as:
  - a. an antagonist.
  - b. a barbiturate.
  - c. an agonist.
  - d. a neurotransmitter.
  
3. A harm-reduction program is designed to:
  - a. minimize the problems associated with addiction.
  - b. aid victims of violent crime committed by drug addicts.
  - c. serve as a secular recovery method.
  - d. aid the community in recovering from the crime and social upheaval associated with drug abuse.
  
4. During his treatment, Vic started having painful urination and feared he might have a sexually transmitted disease. Vic had not been to a doctor in at least ten years and did not have a regular doctor to call. The counselor gave him the name of a local physician who would treat a new patient on short notice. This process is BEST viewed as an example of:
  - a. a referral.
  - b. a consultation.
  - c. case management.
  - d. an aftercare plan.



5. A major focus of the principle of anonymity in the AA fellowship is directed specifically at \_\_\_\_\_.
- press, radio and film
  - people outside the immediate family
  - law enforcement officials
  - anyone who is not in the fellowship
6. Which of the following is the BEST definition of transference?
- Projection of uncomfortable feelings to a nonthreatening object
  - A sudden understanding of self, or realization of how a problem can be solved
  - Unconscious shifting of feelings and fantasies from significant others to the therapist
  - Assuming the values of others, similar to Stockholm syndrome
7. \_\_\_\_\_ includes the identification and ranking of problems needing resolution.
- Client education
  - Treatment planning
  - Assessment
  - Case Management
8. Appropriate documentation in the client's chart includes incidents, reports and \_\_\_\_\_.
- ongoing information.
  - details from the client's fourth step.
  - a record of all visitors.
  - copies of the house log.
9. Which statement about counseling is TRUE?
- Counselors are in the business of changing people.
  - It is best to choose a single counseling approach to master and use with clients.
  - Early childhood experiences are usually irrelevant in counseling.
  - Counselors must be open to their own struggles and personal growth.

10. When an actively-using, alcohol-dependent client presents with depressive symptoms:

- a. cognitive approaches to treating depression should be the focus of treatment.
- b. the presence of a primary depressive disorder should be assessed as soon as possible.
- c. he/she frequently responds quickly to the use of antidepressant medication.
- d. depressive symptoms in the majority of cases will be significantly diminished after detoxification and abstinence.

11. One method for increasing the effectiveness of counseling for Latino clients is:

- a. to assume an active approach with a goal-oriented inquiry.
- b. to maintain the individual's dignity by avoiding familiarity.
- c. to acknowledge the cultural difference and schedule appointments well in advance.
- d. to stress separation due to family enmeshment.

12. Methadone is a drug used in:

- a. IV form to combat the synergistic effects of alcohol and other CNS depressants.
- b. harm reduction programs, usually in urban environments.
- c. conjunction with alternative detoxification protocols for amphetamines.
- d. emergency rooms to counteract the effects of overdose.

13. Bertrand qualifies for job re-training because of a disability. His counselor made an appointment with the state rehabilitation commission to evaluate the type of training that might be beneficial for Bertrand. The counselor also made arrangements for Bertrand to be transported to the appointment, although he was still in primary treatment. The counselor's actions are BEST described as:

- a. consultation.
- b. case management.
- c. client education.
- d. ethical responsibility.

14. One major problem associated with victimology and recovery is that:
- proclaiming powerlessness runs counter to the empowerment mentality needed to overcome victimhood.
  - sexual assault victims fear the exposure associated with attending meetings.
  - African Americans sometimes fear institutionalized racism as it may exist among support groups.
  - feminists are unwilling to accept the principle of anonymity that may shield perpetrators from justice.
15. Mike and his client have developed a personal attraction to one another. The BEST course of action for him is to:
- discuss his feelings with his clinical supervisor to determine the best course of action.
  - talk with the client about transferring to another counselor so that they can date without the conflict of interest.
  - send the client a letter formally ending the personal and therapeutic relationship.
  - inform the client that they will have to wait at least one year before they can date.
16. What BEST represents the information that should be kept in a client's treatment record?
- The name of an attending physician and contact information for referrals to be made
  - Names of family members and their emergency contact numbers
  - Personal notes, insurance information and samples from client journal
  - Information about consultations, diagnosis, treatment, prognosis, and progress
17. African Americans generally do not view alcohol as a prerequisite to fun because:
- there are other culturally acceptable ways to achieve relaxation and sociability.
  - they do not perceive alcohol as a desirable social lubricant.
  - cultural norms prohibit overconsumption of alcohol in public.
  - machismo is a theme that overrides the desire for alcohol.
18. A client presents with non-healing ulcers, abscesses, brittle fingernails, and bruxism. Abuse of which classification of drugs is MOST likely?
- Amphetamines
  - Steroids
  - Inhalants
  - Narcotics



19. Juanita has been seeing a counselor for several weeks and has recently started responding in an argumentative fashion. Last time, she told the counselor "you are just like my father, always on my case!" This situation best exemplifies:
- a defense mechanism.
  - transference.
  - countertransference.
  - negative reinforcement.
20. A client must be told the limits of confidentiality before the first therapy session, along with the cost of the services. These issues are part of the process known as:
- ethical practice.
  - releasing information.
  - protecting confidentiality.
  - obtaining informed consent.
21. The most popular and yet most controversial theory of addiction views:
- addiction as a chronic and incurable disease.
  - punishment as an appropriate social response to alcoholism.
  - harm reduction programs as an integral part of recovery.
  - ongoing research as unnecessary anymore because of past findings.
22. Nervousness or anxiety, sleep difficulty (e.g., insomnia, disturbing dreams), decreased appetite or weight loss, depressed mood are all signs or symptoms of:
- cannabis withdrawal.
  - cocaine withdrawal.
  - sedative, hypnotic, or anxiolytic withdrawal.
  - opioid withdrawal.
23. According to the DSM-5 standards, controlled use of \_\_\_\_\_ during religious observances is not to be considered a diagnosable condition.
- peyote
  - alcohol
  - hallucinogens
  - opium

Written Sample Examinations

24. \_\_\_\_\_ symptoms are the most common psychiatric symptoms seen in AOD abusers.
- Depressive
  - Narcissistic
  - Social Anxiety
  - Panic Attacks
25. Rational emotive behavior therapy is considered to be a \_\_\_\_\_ approach to counseling.
- cognitive behavioral
  - behavioral
  - social learning
  - person-centered
26. Maslow's Hierarchy of Needs suggests that:
- self-actualization is a primary concern for all clients regardless of socioeconomic status.
  - performance is a function of both motivation and ability.
  - self-actualization offers a viable treatment for substance abuse.
  - psychological needs do not become salient until security needs are met.
27. Bethany acknowledged in a group session that she was unfaithful to her husband for several months. Although she has ended the affair, she is now convinced that her husband is cheating on her. The counselor would rightly conclude that the ego defense mechanism of \_\_\_\_\_ is at work here.
- reaction formation
  - denial
  - projection
  - rationalization
28. During a counseling session, a client recalls having been abused as a child. Prior to treatment, the client had no recollection of the abuse. The inability to recall the abuse earlier is an example of the defense mechanism called:
- reaction formation.
  - repression.
  - projection.
  - rationalization.

29. The desire and yearning for a specific substance or substances is known as:
- loss of control.
  - craving.
  - adaptation.
  - relapse.
30. Offering the client a tour of the treatment facility and information on the hours of operation are activities that occur during the \_\_\_\_\_ process.
- intake
  - orientation
  - admission
  - screening
31. Which core function of counseling is most closely associated with the terms "eligible and appropriate?"
- Case management
  - Referral
  - Client education
  - Screening
32. \_\_\_\_\_ is one of case management's hallmark characteristics.
- Advocacy
  - Cooperation
  - Clinical proficiency
  - Stabilization
33. Confidentiality of addiction counseling records in the United States is governed by:
- FLS 9.1 Chapter 4.
  - MHC administered by SAMHSA.
  - 42 CFR part 2.
  - state and local laws.



*Written Sample Examinations*

34. In group therapy, Sara consistently perceives Gary as an angry critical man (like her father) who cares little for other group members' feelings although other group members perceive Gary as kind, caring, and gentle. This interpretation may be described as:
- confrontation.
  - transference.
  - blaming.
  - stinking-Thinking.
35. A diagnostic summary MUST include:
- community resources to be utilized.
  - observable and measurable treatment goals.
  - a written and signed treatment plan.
  - strengths and weaknesses of the client.
36. A disproportionate and excessive response to life circumstances is a typical symptom of:
- depression.
  - post-traumatic stress syndrome.
  - projective identification.
  - suicidal ideation.
37. Eye contact, posture, and appropriate encouraging responses are necessary for the communication skill of:
- attending.
  - interpretation.
  - paraphrasing.
  - summarization.
38. Which of these is the BEST explanation of a synergistic drug interaction?
- Mixing some drugs causes a reaction that increases the drug effects beyond those that are associated with each drug separately.
  - Some drug interactions can cause hand tremors when neither drug alone causes them.
  - It is a cross allergic reaction that can include anaphylactic shock.
  - Synergism leads to the development of negative symptoms, such as a flat affect.

39. The development of the group culture refers to:
- the acclimation of differing cultural backgrounds in the group.
  - the establishment of norms which will help the group to develop as a social system.
  - group cohesion.
  - the creation of the group.
40. The concept of informed consent requires that before agreeing to accept treatment, clients should know the goals of therapy, their rights and obligations, the limits of confidentiality and \_\_\_\_\_.
- availability of referral services
  - community resources to be used
  - with whom they will be participating in group activities
  - the financial obligation associated with the services
41. With regard to relapse prevention, what is the BEST definition of a "trigger?"
- When the client makes the choice to return to drinking/drug using
  - The build-up of anger that most clients experience before a relapse experience
  - Those situations, events, people, places, thoughts, and activities that re-ignite the sense of need for drugs
  - The single event that is the root cause of the substance use disorder and precipitates the "bottom" that leads to treatment
42. A client presents a crisis situation. As a counselor, your MOST important function is:
- to solve the client's presenting problem.
  - to help convert the emergency into a solvable problem.
  - to refer him/her to the nearest psychiatrist.
  - to try not to get the client more upset.
43. One criticism associated with the disease model of addiction is that:
- there does not appear to be an inevitable progression of symptoms.
  - proponents believe that willpower is the key to long term recovery.
  - emphasis is placed on social experiences that are unrelated to alcohol.
  - too much of the focus is on psychological factors.

*Written Sample Examinations*

44. Observable and measurable goals are BEST associated with:
- a. assessment.
  - b. case management.
  - c. client education.
  - d. treatment planning.
45. The predominant change to the overall diagnostic criteria for substance use disorder in the DSM-5 is the inclusion of \_\_\_\_\_ and the exclusion of \_\_\_\_\_.
- a. loss of control; family problems
  - b. craving; recurrent legal problems
  - c. efforts to cut down; elevated GGT
  - d. withdrawal; depressed mood
46. Which of the following is NOT an SSRI?
- a. Cylert
  - b. Paxil
  - c. Prozac
  - d. Zoloft
47. MOST individuals who use tobacco on a regular basis will develop tobacco use disorder prior to the age of \_\_\_\_\_.
- a. 18
  - b. 21
  - c. 30
  - d. 35



USE THE FOLLOWING VIGNETTE TO ANSWER QUESTIONS 48 – 50

Kia is a 20 year old female whose parents are first generation immigrants from Japan. She has been seeing you because she has a substance use disorder related to her use of amphetamines. One afternoon, her parents arrive unexpectedly at your office to insist that you help them convince their daughter to return to Japan where her fiancé is waiting to marry her. This is an arranged marriage and she has not met her fiancé.

48. What is the best response to the parents?

- a. Calmly tell them that you cannot confirm nor deny that their daughter is a client.
- b. Bring in the daughter for a family session to sort out the competing values and traditions.
- c. Encourage Kia to return to Japan, where perhaps she can start a new life away from old friends.

49. Kia tells you she is torn between her parents' culture and her own, more American ideas. How might you help her?

- a. Refer her to a family therapist because this has nothing to do with her drug use.
- b. Encourage her to examine her beliefs and make her decision based on what she believes is best for her, without regard to her parents' wishes.
- c. Encourage her to pursue her American lifestyle because you believe that an arranged marriage would be adding to her unhappiness and thus, set her up for relapse.

50. If Kia decides to return to Japan and marry, what is your responsibility?

- a. To try and convince her that as an American, she doesn't have to go.
- b. Attempt to find a referral so she can continue her treatment.
- c. Close her case and wish her a happy life

# Section 4, Chapter 3:

## Test Keys

### SAMPLE EXAM #1 – KEY

1. B	11. B	21. D	31. A	41. B
2. C	12. C	22. C	32. A	42. C
3. A	13. C	23. D	33. B	43. B
4. C	14. D	24. B	34. B	44. C
5. C	15. B	25. D	35. C	45. A
6. D	16. B	26. B	36. B	46. D
7. D	17. A	27. C	37. D	47. C
8. B	18. B	28. A	38. A	48. B
9. A	19. B	29. B	39. D	49. A
10. B	20. A	30. C	40. C	50. C

### SAMPLE EXAM #2 – KEY

1. A	11. A	21. B	31. A	41. B
2. A	12. A	22. B	32. D	42. A
3. B	13. D	23. D	33. A	43. C
4. B	14. A	24. B	34. C	44. B
5. B	15. B	25. D	35. D	45. B
6. C	16. B	26. A	36. B	46. A
7. B	17. D	27. B	37. C	47. D
8. A	18. D	28. B	38. C	48. C
9. C	19. D	29. B	39. A	49. A
10. D	20. B	30. D	40. C	50. C

### SAMPLE EXAM #3 – KEY

1. B	11. A	21. A	31. D	41. C
2. C	12. B	22. A	32. A	42. B
3. A	13. B	23. C	33. C	43. A
4. A	14. A	24. A	34. B	44. D
5. A	15. A	25. A	35. D	45. B
6. C	16. D	26. D	36. B	46. A
7. B	17. A	27. C	37. A	47. B
8. A	18. A	28. B	38. A	48. A
9. D	19. B	29. B	39. B	49. B
10. D	20. D	30. B	40. D	50. B

SAMPLE EXAM ANSWER SHEET

Score: \_\_\_\_\_

START TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

- |                     |                     |                     |
|---------------------|---------------------|---------------------|
| 1. [A] [B] [C] [D]  | 18. [A] [B] [C] [D] | 35. [A] [B] [C] [D] |
| 2. [A] [B] [C] [D]  | 19. [A] [B] [C] [D] | 36. [A] [B] [C] [D] |
| 3. [A] [B] [C] [D]  | 20. [A] [B] [C] [D] | 37. [A] [B] [C] [D] |
| 4. [A] [B] [C] [D]  | 21. [A] [B] [C] [D] | 38. [A] [B] [C] [D] |
| 5. [A] [B] [C] [D]  | 22. [A] [B] [C] [D] | 39. [A] [B] [C] [D] |
| 6. [A] [B] [C] [D]  | 23. [A] [B] [C] [D] | 40. [A] [B] [C] [D] |
| 7. [A] [B] [C] [D]  | 24. [A] [B] [C] [D] | 41. [A] [B] [C] [D] |
| 8. [A] [B] [C] [D]  | 25. [A] [B] [C] [D] | 42. [A] [B] [C] [D] |
| 9. [A] [B] [C] [D]  | 26. [A] [B] [C] [D] | 43. [A] [B] [C] [D] |
| 10. [A] [B] [C] [D] | 27. [A] [B] [C] [D] | 44. [A] [B] [C] [D] |
| 11. [A] [B] [C] [D] | 28. [A] [B] [C] [D] | 45. [A] [B] [C] [D] |
| 12. [A] [B] [C] [D] | 29. [A] [B] [C] [D] | 46. [A] [B] [C] [D] |
| 13. [A] [B] [C] [D] | 30. [A] [B] [C] [D] | 47. [A] [B] [C] [D] |
| 14. [A] [B] [C] [D] | 31. [A] [B] [C] [D] | 48. [A] [B] [C] [D] |
| 15. [A] [B] [C] [D] | 32. [A] [B] [C] [D] | 49. [A] [B] [C] [D] |
| 16. [A] [B] [C] [D] | 33. [A] [B] [C] [D] | 50. [A] [B] [C] [D] |
| 17. [A] [B] [C] [D] | 34. [A] [B] [C] [D] |                     |