

Name _____

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) The nurse is teaching staff at a community mental health clinic about what constitutes a mental disorder. Which comment by staff indicates to the nurse the need for further teaching? 1) _____
A) "Experiencing pain and suffering may imply a mental disorder."
B) "Being unable to function in everyday life is consistent with a mental disorder."
C) "Experiencing distressful symptoms may imply a mental disorder."
D) "Grieving after a loss may signal a mental disorder."
- 2) During the evaluation of the effectiveness of the nurse's discharge teaching, which client report would indicate to the nurse that the client understands the leading cause of disability and decrement in health? The client reports a need to incorporate strategies to prevent: 2) _____
A) Obesity. B) Cancer. C) Depression. D) Anxiety.
- 3) The nurse is assessing a client in the home. Given the nurse's knowledge of the top 10 causes of disability worldwide, choose the priority area for data collection. 3) _____
A) Mood and patterns of alcohol usage
B) Social interactions and history of abuse
C) Irrational fears and quality of communication
D) Memory and childhood history
- 4) The nurse is serving on a community task force to implement strategies to address *Healthy People 2010* mental health problems. To evaluate the effectiveness of community interventions specific to *Healthy People 2010*, the nurse will want to measure which of the following? 4) _____
Select all that apply.
A) Incidence of serious mental illness among homeless adults
B) Adolescent suicide rates
C) Number of employers who provide exercise programs for employees
D) High school drop-out rates
E) Emergency Department visits
- 5) The psychiatric nurse is reflecting on the treatment and care of the mentally ill throughout history. Which of the following philosophical beliefs most guided treatment of the mentally ill during 17th century Europe? 5) _____
A) The mentally ill were possessed by evil spirits that inflicted emotional suffering.
B) The body's humors were responsible; blood, bile, and phlegm must be balanced.
C) Madness was best overcome by discipline and brutality.
D) The mentally ill were divinely inspired and should be treated with care and benevolence.
- 6) The nurse plans to implement health promotion activities at the local senior citizen center. To meet the goal of promoting knowledge related to maximizing mental health and functional ability, the nurse's teaching is guided by World Health Organization research and should include discussion of which priority area specific to the leading causes of mental disability? 6) _____
A) Over-the-counter medications B) Dementia
C) Alcohol D) Social isolation

- 7) The nurse is planning teaching regarding major mental health problems in the United States and goals to be achieved by the end of the decade. The nurse's teaching should be guided by: 7) _____
- A) The U.S. Surgeon General's report on mental health and mental illness.
 - B) *Healthy People 2010*.
 - C) The *Global Burden of Disease* study.
 - D) Current World Health Organization research.
- 8) During shift report, a nurse describes a client as "crazy." Which approach by the nurse would be best? 8) _____
- A) Role model using the term "nervous breakdown."
 - B) Ask the staff what terminology they wish to use.
 - C) Suggest that staff use the term "mentally ill."
 - D) Say nothing.
- 9) When describing a client's behavior, the nurse used the Latin term *delusion*. Given the use of this term, which of these interpretations of the client's behavior is correct? The client is exhibiting a(n): 9) _____
- A) Intense sadness.
 - B) Extreme anger.
 - C) False belief.
 - D) Loss of intellect.
- 10) The nurse is using the *Healthy People 2010* report to plan mental health teaching to a group of adolescents. Given the nurse's use of this report, the nurse's teaching should include: 10) _____
- A) Discussion of responsible behavior and choices.
 - B) Strategies to promote normal grieving.
 - C) Stress management techniques.
 - D) Strategies to prevent suicide.
- 11) The industrial nurse is planning programs to address mental health problems identified in the *Healthy People 2010* report. Specific to this report, the nurse should include which of the following with company employees at the worksite? 11) _____
- A) Substance abuse education
 - B) Depression screening
 - C) Stress management
 - D) Abuse screening
- 12) The school nurse is assessing the adolescent who is experiencing adjustment problems in school. Given the nurse's knowledge of the mental health problems identified in the *Healthy People 2010* report, the nurse should assess which of the following areas? 12) _____
- Select all that apply.
- A) Educational testing
 - B) Mood and suicidal ideation
 - C) Psychiatric history
 - D) Height and weight
 - E) Alcohol and drug use
- 13) The client has frequently presented to the clinic with multiple physical complaints. The multiple physical complaints would warrant the nurse to screen the client for: 13) _____
- A) Chronic illness.
 - B) Mental disorder.
 - C) Deviant behavior.
 - D) Hospitalization.

- 14) The nursing assistant asks the psychiatric nurse the location of the first asylum for the mentally ill. Which nursing response is appropriate? 14) _____
- A) "This is not part of your role on this unit."
 - B) "The first asylum for the mentally ill was in Morocco."
 - C) "The first asylum for the mentally ill was St. Mary of Bethlehem (*Bedlam*)."
 - D) "Why do you want to know this?"
- 15) The nurse is planning care for the client who presents with frequent reports of multiple physical complaints. Given knowledge of the leading causes of mental disability, the nurse should plan to include further data collection in which of the following priority areas? 15) _____
- A) History of family violence
 - B) Relationships with others
 - C) Clarity of thought processes
 - D) Alcohol usage
- 16) The psychiatric-mental health nursing student is preparing to attend a meeting of the psychiatric mental health care team to discuss possible updates to clients' diagnoses. In preparing for this meeting, the nursing student should consult which of the following references? 16) _____
- A) Psychiatric nursing care plan manual
 - B) *Diagnostic and Statistical Manual of Mental Disorders*
 - C) *Standards of Psychiatric Nursing Practice*
 - D) Dictionary of common mental disorders
- 17) The nurse is told that the client most likely has the diagnosis of obsessive-compulsive disorder. The nurse is not sure of the assessment data and behaviors that accompany this disorder. Which action would be most appropriate for the nurse to take? 17) _____
- A) Consult the *Diagnostic and Statistical Manual of Mental Disorders* for diagnostic criteria.
 - B) Ask the primary health provider to identify needed subjective and objective assessment data.
 - C) Document all subjective and objective data provided by the client.
 - D) Research obsessive-compulsive disorder in the medical dictionary.
- 18) The home health nurse is caring for a number of clients with chronic illnesses. Given World Health Organization (WHO) research, the nurse realizes that the client with which of the following is at greatest risk for mental disability? 18) _____
- A) Psychotic disorders
 - B) Panic disorder
 - C) Anxiety disorders
 - D) Bipolar disorder
- 19) A co-worker in the long-term care setting is planning programs to address mental health issues of elders and asks the nurse where to access the *Healthy People 2010* report. The nurse's correct response is which of the follow? 19) _____
- A) American Psychiatric Nurses' Association
 - B) World Health Organization
 - C) United States Surgeon General
 - D) United States Department of Health and Human Services

20) The psychiatric nurse states that today's nursing practice is based on contemporary theories concerning the etiology of mental disorder. Given this theoretical basis, the nurse would most likely give priority to which of the following assessments? 20) _____

Select all that apply.

- A) Psychotropic medications
- B) Family history of mental disorder
- C) Family communication patterns
- D) Early childhood interactions
- E) PET and CT scans

21) The nursing assistant verbalizes to the psychiatric nurse that normal people don't have mental disorders. Which approach by the nurse would be best? 21) _____

- A) Refer the nursing assistant back to the psychiatric orientation materials.
- B) Alert the nursing manager of the nursing assistant's remark.
- C) Ignore the comment; the nurse has no responsibility in this situation.
- D) Instruct that anyone can have a mental health problem.

22) During the nursing assessment of the adult client, the nurse finds the client's beliefs and actions related to common health practices to be "bizarre." Which action would be most appropriate for the nurse to take at this time? 22) _____

- A) Repeat the assessment later in the day.
- B) Write a nursing diagnosis to address the "bizarre" beliefs and actions.
- C) Communicate the findings to the health care team.
- D) Inquire as to the culture with which the client identifies.

23) The nurse is teaching the client regarding the concept of mental disorders. In instructing the client, what areas should be covered in the explanation of what impacts the determination of a mental disorder? 23) _____

Select all that apply.

- A) Culture
- B) Mother-child interactions
- C) Biochemistry
- D) Brain structure
- E) Social conditions

24) During an admission assessment on an adult unit, the nurse is thinking that the client's beliefs and actions regarding commonly accepted health practices are "bizarre." To help establish the presence of a mental disorder, the nurse should first collect information about the client's: 24) _____

Select all that apply.

- A) Family history.
- B) Culture.
- C) Age.
- D) Psychiatric history.
- E) Occupational history.

- 25) The nurse is sharing client assessment data with the multidisciplinary health care team. Which comment by the nurse is irrelevant and indicates a misunderstanding of the concept of a mental disorder? 25) _____
- A) "The client reports a loss of interest in usual pleasurable activities and commitments."
 - B) "The client reports significant emotional distress about the current situation."
 - C) "The client denies thoughts of harming self or others."
 - D) "The client has some very inappropriate religious ideas and spiritual beliefs."
- 26) The psychiatric nurse is asked to explain the primary focus in the assessment and treatment of mental illnesses during the mid-20th century. Given this request, the nurse would emphasize beliefs and actions related to: 26) _____
- A) Decay of intellect or of the nervous system.
 - B) Faulty life habits and interactions.
 - C) Social dimension and drug treatment.
 - D) Classification of symptoms.
- 27) The nurse is teaching a group of students the various historical explanations of mental illness. Which statement by the students indicates understanding of the nurse's teaching regarding the era of magico-religious explanations? 27) _____
- A) "Mental illnesses were influenced by the moon; hence, the term lunacy."
 - B) "The insane were believed to be divinely inspired and care was generally benevolent and kindly."
 - C) "Mental and physical illness were the result of superhuman forces that inflicted suffering."
 - D) "Mental illnesses were caused by imbalances in body humors: blood, bile, and phlegm."
- 28) Given prevalence statistics of the five psychiatric disorders that comprise the top 10 causes of disability worldwide, the nurse chooses which of the following as a priority screening for clients? 28) _____
- A) Bipolar disorder
 - B) Alcohol abuse
 - C) Schizophrenia
 - D) Depression
- 29) When reading historical psychiatric texts, which behavioral description indicates that the nurse understands the correct use of the 18th century term *hallucination*? 29) _____
- A) Fixed idea
 - B) Bizarre actions
 - C) False belief
 - D) False perception
- 30) The new nurse states that the client's beliefs and actions related to common health practices are "bizarre" and must indicate some type of deviant behavior. In planning a response, the nurse is guided by: 30) _____
- A) The knowledge that beliefs and behaviors are only deviant if the client thinks there is a problem.
 - B) The need for further assessment to determine the duration of the beliefs and actions.
 - C) A definition of deviance that covers all clinical situations.
 - D) The knowledge that beliefs and behaviors are judged by cultural and social considerations.
- 31) Due to a staff member's absence, the nurse is reviewing staff assignments for the day. Which task can the nurse delegate to the psychosocial rehabilitation worker? 31) _____
- A) Comparison of physician's orders with the medication records
 - B) Assessment of a long-term client
 - C) Conflict resolution teaching to a small group of clients
 - D) Routine medication administration to a stable client

- 32) The psychiatric-mental health nurse is working with the new graduate nurse who is orienting to the psychiatric unit. Which comment by the new graduate indicates to the nurse that further clarification of the generalist nursing role is needed? 32) _____
- A) "I am a little nervous about conducting psychotherapy with clients."
 - B) "I am doing some reading on how to incorporate complementary interventions into treatment plans."
 - C) "I will spend time each day evaluating the effectiveness of the therapeutic milieu."
 - D) "I would feel better if you would look at my documentation that addresses progress toward treatment goals."
- 33) While caring for the client with a mental illness, which action by the psychiatric-mental health nurse best indicates use of Hildegard Peplau's nursing theory? 33) _____
- A) Establishment of a therapeutic nurse-client relationship
 - B) Assessment of client's interactions with their environment
 - C) Evaluation of the effectiveness of the client's coping and adaptation skills
 - D) Intervention to enhance the client's abilities to perform self-care
- 34) The nurse is serving on a committee that is charged with reviewing the roles and responsibilities of the nurses on the psychiatric unit. Which publication should the nurse bring to the first meeting? 34) _____
- A) American Nurses Association, *Code of Ethics*
 - B) American Nurses Credentialing Center certification requirements
 - C) *Psychiatric-Mental Health Nursing Standards of Practice*
 - D) *Diagnostic and Statistical Manual of Mental Disorders*
- 35) When planning nursing care, the nurse understands that the main value of having knowledge of a variety of nursing theories is to: 35) _____
- A) Build the skill and effectiveness of the nurse's practice.
 - B) Promote consideration and use of nursing research.
 - C) Enhance collaboration and understanding between the nurse and the mental health care team.
 - D) Implement individualized nursing interventions depending on what is best for the client's situation.
- 36) The nurse is planning a brief presentation about the "first American psychiatric nurse." Who will the nurse research? 36) _____
- A) Linda Richards
 - B) Harriet Bailey
 - C) Gwen Tudor (Will)
 - D) Hildegard Peplau
- 37) If psychiatric nurses used Orem's theory for structuring much of their nursing practice, a major focus area for assessment would be the client's ability to: 37) _____
- A) Adapt and function to meet various role expectations.
 - B) Enter into a therapeutic one-to-one relationship with the nurse.
 - C) Care about self and participate in self-healing.
 - D) Implement self-care to meet psychosocial needs.

- 38) The nurse is admitting a client to the psychiatric unit. Which nursing action is correct? 38) _____
- A) Instruct the client that the mental health team will decide what the client needs to do in treatment.
 - B) Discuss with the client information that is to be shared with family members and the mental health team.
 - C) Alert the client that the psychiatrist will do all the intake assessment so as to maximize the efficiency of the team.
 - D) Instruct the client that all information gathered during the assessment will be shared with the mental health team.
- 39) The client asks the nurse if certain changes can be made in the unit milieu. Which action by the nurse indicates understanding of the nursing role in the therapeutic milieu? The nurse: 39) _____
- A) Refers the client's requests to the psychiatric social worker.
 - B) Refers the client's requests to the psychosocial rehabilitation worker.
 - C) Instructs the client that no changes can be made.
 - D) Discusses the desired changes with the client.
- 40) The nurse is reflecting on the nursing role within the mental health team. The nurse understands that the main purpose of delivering care using a multidisciplinary team is to: 40) _____
- A) Maximize the efficiency of the health care team with each team member learning from the others.
 - B) Increase the opportunity for interpersonal interaction between the client, family, and team members.
 - C) Make the best use of the different abilities of mental health team members in order to facilitate client progress.
 - D) Facilitate the case management process by delivering care using a multidisciplinary health care team.
- 41) The nursing student is asked which historical event was most significant in the development of psychiatric nursing as a specialty and psychotherapeutic roles for nurses. Which response by the nursing student indicates understanding of important events related to development of the psychiatric nursing role? 41) _____
- A) Release of the report *Nursing for the Future*
 - B) Passage of the National Mental Health Act
 - C) Publication of *Commonsense Psychiatry*
 - D) Passage of the Community Mental Health Centers Act
- 42) The nurse is planning activities to enhance collaboration within the mental health care team. Which activities will be helpful toward this goal? 42) _____

Select all that apply.

- A) Discussion of decisions that can be made autonomously
- B) Discussion of decisions that require team unity
- C) Identification of ways to ignore individual power bases
- D) Review of interpersonal communication skills
- E) Identification of ways to minimize diversity among team members

- 43) The nurse is asked if Florence Nightingale had any impact on the role of the nurse in psychiatric-mental health nursing. What is the nurse's correct response? 43) _____
- A) "Yes, Nightingale was among the first to note that the influence of nurses has psychological components."
 - B) "No, Nightingale focused her ideas on nursing education rather than direct client care."
 - C) "Yes, Nightingale developed the idea of the therapeutic relationship."
 - D) "No, Nightingale emphasized the physical environment for healing."

- 44) The nurse assesses that the client has problems choosing productive, safe leisure activities. Which member of the mental health team should the nurse consult with? 44) _____
- A) Occupational therapist
 - B) Recreational therapist
 - C) Clinical psychologist
 - D) Attending psychiatrist

- 45) The client's treatment plan includes teaching related to possible side effects of psychotropic medications. Which member of the mental health team should plan to implement the teaching? 45) _____
- A) The psychiatrist
 - B) The psychosocial rehabilitation worker
 - C) The primary therapist
 - D) The nurse

- 46) The nurse's new job description at the generalist level of practice reflects the definition of psychiatric-mental health nursing and the *Psychiatric-Mental Health Nursing Standards of Practice* (ANA, APNA, ISPN). To fulfill employment expectations, the nurse might plan programs and interventions in which of the following areas? 46) _____

Select all that apply.

- A) Stress management strategies
- B) Medication teaching for anti-anxiety medications
- C) Parenting classes for new parents
- D) Early diagnosis of psychiatric disorders
- E) Family and group psychotherapy

- 47) If the nurse is using the nursing theory that has shaped psychiatric-mental health most directly, which nursing action should take priority? 47) _____
- A) Assess the client's abilities in areas of self-care.
 - B) Encourage the client's sensitivity and caring for self.
 - C) Teach effective coping skills.
 - D) Establish a therapeutic nurse-client relationship.

- 48) The nursing student asks the nurse the reason that knowledge of nursing theories is important. The nurse should respond that nurses use nursing theories to: 48) _____

Select all that apply.

- A) Organize assessment data.
- B) Generate goals.
- C) Generate nursing actions.
- D) Plan interventions.
- E) Evaluate outcomes.

49) The psychiatric-mental health nurse is asked to develop an intervention for the nursing unit based on Watson's theory of caring. Given this assignment, which intervention is most appropriate for the nurse to implement? 49) _____

- A) One-to-one debriefing sessions each week with individual unit nurses and the unit manager
- B) Clarification of values and cultural beliefs that might pose barriers to caring for clients
- C) Identification of additional coping skills for new nurses on the unit
- D) Discussion of the impact of recent changes in hospital policy on the nursing staff

50) If the nurse was assessing the client from primarily a 19th century perspective, in which dimension would the nurse most likely focus data collection? 50) _____

- A) Spiritual
- B) Emotional
- C) Physical
- D) Social

51) The psychiatric-mental health nurse is planning a personal program of continuing education in order to better meet the challenges of the future in psychiatric nursing practice. What areas should be included in the nurse's plan for continuing education? 51) _____

Select all that apply.

- A) Genetic research
- B) Physical health of psychiatric clients
- C) Psychiatric nursing care in nontraditional settings
- D) Psychopharmacology
- E) Psychobiology

52) The psychiatric-mental health nurse is reflecting on professional role activities and is referred to the standards of professional performance. To which organization should the nurse look for guidance? 52) _____

- A) North American Nursing Diagnosis Association
- B) American Nurses Association
- C) National League for Nursing
- D) American Nurses Credentialing Center

53) The nurse is writing a scholarly paper on early nursing leaders who made major contributions to the development of the multifaceted psychiatric nursing role of today. When writing the paper, the nurse should include which of the following nurses? 53) _____

Select all that apply.

- A) Frances Sleeper
- B) Hildegard Peplau
- C) Linda Richards
- D) Gwen Tudor (Will)
- E) Florence Nightingale

54) Upon the client's arrival on the patient care unit, the nurse begins implementation of the nursing process. By using the nursing process, the nurse's practice is most reflective on which nursing theorist? 54) _____

- A) Ida Jean Orlando
- B) Dorothea Orem
- C) Hildegard Peplau
- D) Jean Watson

- 55) The nurse is reflecting on psychiatric nursing care in the 19th century. Which nursing diagnosis is most consistent with the focus of psychiatric nursing care during the 19th century? 55) _____
- A) Self-care deficit
 - B) Altered thought processes
 - C) Anxiety
 - D) Ineffective individual coping
- 56) The nurse is part of a mental health team and is having some role issues regarding how best to facilitate client progress toward therapeutic goals. What is the priority action by the nurse in order to aid the work of the team as they assist the client? 56) _____
- A) Recognize that conflict is natural and expected.
 - B) Acknowledge the diversity of the mental health team.
 - C) Determine personal values, biases, and goals .
 - D) Attend all mental health team meetings.
- 57) The unit manager is consistently advocating for self-awareness among the psychiatric-mental health nursing staff in order to promote quality care. From which theoretical base is the unit manager operating? 57) _____
- A) Sister Callista Roy's adaptation theory
 - B) Martha Rogers's principles of homeodynamics
 - C) Jean Watson's theory of human caring
 - D) Dorothea Orem's theory of self-care
- 58) The nurse is writing a care plan for a client with schizophrenia. Which of the following interventions demonstrates that the nurse is working from the Medical model? 58) _____
- A) The client will learn techniques that will interrupt hallucinations.
 - B) The client will learn about the therapeutic effects of medications.
 - C) The nurse will teach the client appropriate social behaviors in group and one-on-one interactions.
 - D) The nurse will ask the client to identify responsible ways to manage delusional material.
- 59) The charge nurse is reviewing the care plans for the clients on the unit. In several care plans, the nurse has noted that the words *noncompliant* and *manipulative* have been used to describe those clients with severe mental illness. The nurse plans on discussing this with the staff at the next unit meeting. Which of the following responses will demonstrate the charge nurse's personal accountability to the staff? 59) _____
- A) "While these terms might be accurate, they are not appropriate to use in a care plan."
 - B) "If you use these terms regularly, you will need to reassess your reasons for working in psychiatric settings."
 - C) "How might these terms reflect negativity and stigma towards persons with mental illness?"
 - D) "Does the use of these terms reflect an underlying level of stress on the unit that I should be aware of?"
- 60) The nurse is interviewing a Native American client who acknowledges seeing "spirits." Which of the following actions will be most important for the nurse to take to assist in assessing this client's symptoms? 60) _____
- A) Consult the physician regarding how best to evaluate this symptom.
 - B) Observe the client's behavior to determine how the client expresses this symptom.
 - C) Obtain a profile of the client's cultural norms on which to interpret this symptom.
 - D) Carefully question the client's family to prevent aggravating this symptom.

- 61) The nurse has just received a report on a new client admitted for depression. The client has severe cerebral palsy, communicates only with a computer, and is quadriplegic. Which of the following statements best demonstrates that the nurse has the ability to respond to this client? 61) _____
- A) "It is important to interview the client's family before I meet the client."
 - B) "I will read the record and talk with the physician to understand the client's disabilities."
 - C) "This assignment may be a challenge for me and I will need to be aware of my feelings and any potential fears related to caring for this client."
 - D) "The first thing I will do is thoroughly assess the client's needs and abilities."
- 62) The client says to the nurse, "It's my right to refuse medications." Which statement best reflects the nurse's ability to create a mutual understanding? 62) _____
- A) "Can you tell me what concerns you have about medications?"
 - B) "If you refuse your medications, you will just get sick again."
 - C) "Refusing your medications is your right, but it won't get you out of here."
 - D) "Can you tell me why you're so angry that you will refuse your medications?"
- 63) The nurse is caring for a client with depression who is withdrawn. Which of the following statements suggests that the nurse is able to challenge his or her dogmatic beliefs? 63) _____
- A) "I understand that clients with depression have anger turned inward."
 - B) "I realize that if clients would just change their negative thoughts, they wouldn't be depressed."
 - C) "I realize that clients with depression are not just avoiding their problems."
 - D) "I understand that if clients would just develop strong interests, they wouldn't be depressed."
- 64) A nurse is seeking consultation on strategies to cope with the potential for burnout while working on a psychiatric unit. Which of the following strategies demonstrates the nurse's ability to reduce the occurrence of burnout? 64) _____
- A) Pursue personal needs for social interactions during days off.
 - B) Focus on paperwork when the stress of listening to the clients becomes too much.
 - C) Maintain an accurate awareness of each client's needs throughout inpatient stays.
 - D) Take breaks often to relieve internal stress signals.
- 65) A female client has made the decision to leave her husband who abuses alcohol. She states she is very depressed. Which of the following statements best demonstrates the nurse's empathy? 65) _____
- A) "I am very sorry you are going through this difficult time. I wish things could be different."
 - B) "I can understand that you are feeling depressed right now. It must have been a very difficult decision to make. I'll sit here with you for a while."
 - C) "It is sad thing to break up a marriage. It's a shame that it didn't work out for you."
 - D) "I know you are feeling very depressed right now. I felt the same way when I left my husband. From my experience, you are doing the right thing."
- 66) An adolescent who is pregnant asks the nurse on the psychiatric unit, "Do you think I should give my baby up for adoption?" Which of the following responses best reflects the nurse's empathy? 66) _____
- A) "Why would you want to give the baby up for adoption?"
 - B) "What do you feel would be the best thing for you to do?"
 - C) "It would probably be best for you and the baby."
 - D) "It seems you will feel guilty if you gave your baby away."

- 67) The charge nurse has just given a presentation about the importance of practicing self-care. Which of the following staff behaviors will the nurse find concerning? 67) _____
- A) Requesting to be alone during break time
 - B) Calling the unit on days off to inquire about clients' progress
 - C) Verbalizing feelings about a client's situation
 - D) Giving feedback to a fellow staff member about derogatory comments
- 68) A client approaches the nurse grimacing, talking in a whisper, and waving his arms. Which of the following actions best demonstrates the nurse's ability to develop a therapeutic relationship? 68) _____
- A) Ignore the client to convey disapproval of the behavior.
 - B) Confront the client about the behavior to encourage insight.
 - C) Assist the client to leave the area to prevent distress to others.
 - D) Greet the client by name to demonstrate caring.
- 69) A nurse is taking a class on providing culturally competent care for clients with severe mental illnesses. Which response best reflects the nurse's self-awareness of the sociocultural factors influencing his or her beliefs? 69) _____
- A) "I have been through therapy, so I know what to expect from clients with mental illnesses."
 - B) "When I was growing up, my parents believed that mental illnesses were the work of evil spirits."
 - C) "My father was a psychiatrist, so I am very knowledgeable about how to work with mental illnesses."
 - D) "All that I need to understand about the culture of mental illness is available on the internet."
- 70) During a staff meeting, a nurse makes the following remark about the clients on the unit, "These clients are just trying to avoid the problems of life. They just need to go out and work." Which of the following responses best demonstrates the charge nurse's respectful attitude toward this nurse? 70) _____
- A) "I agree that most clients are just avoiding life, but our mission is to provide care."
 - B) "It is not our responsibility to determine whether clients have problems or not."
 - C) "You seem to be having trouble accepting the fact that clients can lose emotional control of their lives. Why don't we talk about this as a group?"
 - D) "When you say that our clients are just avoiding life problems, it sounds like you are frustrated by the needs our clients express. Am I hearing you correctly?"
- 71) The nurse is caring for a client with depression. Which nursing intervention best demonstrates the nurse's availability to the client? 71) _____
- A) Assist the client with the activities of daily living.
 - B) Be honest with the client about medication effects.
 - C) Provide privacy when interviewing the client.
 - D) Let the client know that time heals all sorrow.
- 72) A client comes to the nurse's station yelling, "I have to call the FBI. The bombs are set to destroy Washington, D.C. at 1:00 pm. Please help me. It will be your fault if I don't call." Which intervention best demonstrates the nurse's sensitivity? 72) _____
- A) Share your concerns that the client's request is unreasonable.
 - B) Assist the client to become aware that this is a delusional belief.
 - C) Switch the topic of conversation to defuse the client's underlying agitation.
 - D) Listen carefully for the underlying emotion expressed by the client's request.

- 73) A nurse has completed orientation to a locked psychiatric unit. Which statement best demonstrates that the nurse is prepared to fulfill the professional role? 73) _____
- A) "I know there is a fine line between the clients and the staff."
 - B) "I can maintain proper distance by engaging in therapeutic interventions."
 - C) "I will ask for support from colleagues when I need it."
 - D) "I took a course in self-defense so I can take care of myself."
- 74) The nurse has just taken a continuing education class on assertive communication techniques. Which response best demonstrates that the nurse understands assertive behavior? 74) _____
- A) "Yes, they always ignore staff requests."
 - B) "It would be selfish to ask for time off."
 - C) "I will demand a change in my schedule."
 - D) "No, I cannot work for you on Sunday."
- 75) Which intervention best demonstrates practicing with detached concern? 75) _____
- A) Sitting quietly with a client who is sobbing uncontrollably
 - B) Providing a critical perspective of the client's feelings
 - C) Setting rigid boundaries to separate the nurse's experience from the client's
 - D) Sharing personal beliefs and opinions in order to enhance connection with the client
- 76) The nurse is planning care for a client who has been withdrawn and isolated for the last three days. Which action will best demonstrate the nurse's empathy for this client? 76) _____
- A) Explore the client's feelings of anger related to powerlessness.
 - B) Focus on the client's strengths to enhance self-esteem.
 - C) Encourage the client's attendance and participation in groups.
 - D) Approach the client regularly and spend time with the client.
- 77) The nurse receives the shift report on a newly admitted client with a history of drug abuse and prostitution. Prior to hospitalization, the client's parental rights were terminated. Which of the following actions best demonstrates the nurse's ability to enhance self-knowledge? 77) _____
- A) The nurse will examine his or her own feelings with regard to this client.
 - B) The nurse will review the current literature pertaining to drug addiction.
 - C) The nurse will ignore the challenge to his or her self-view.
 - D) The nurse will ask for guidance from the charge nurse.
- 78) The nurse is admitting a client who is from Kenya to the psychiatric unit. Which of the following actions will demonstrate cultural competence? 78) _____
- A) Ask a family member to stay during the assessment interview.
 - B) Follow the admission assessment form.
 - C) Talk with the client to determine fluency in English.
 - D) Arrange for an interpreter to assist.
- 79) The nurse is planning care for an Asian client who is Buddhist. Which of the following actions is most important for the nurse to take to provide culturally relevant mental health care? 79) _____
- A) Develop a thorough understanding of Buddhist religion.
 - B) Explain western medical ideas to assist cultural adaptation.
 - C) Seek clarification of this client's health beliefs.
 - D) Use standard nursing interventions for this client.

- 80) A family member caring for a relative with dementia complains of exhaustion. Which of the following responses best conveys respect for this family member's situation? 80) _____
- A) "I experienced the same thing with my mother. What about getting a housekeeper?"
 - B) "It sounds like you are overwhelmed. You may benefit from respite care services."
 - C) "It sounds like your home situation is too demanding. What about seeking individual therapy to cope with your issues?"
 - D) "Caring for a person with dementia is too much for one person. You should place your relative in a nursing home."
- 81) The nurse is working with a client who becomes upset and tells the nurse, "I've decided to give up on finishing my bachelor's degree." Which response best reflects the nurse's belief that the client is able to find the solution to this concern? 81) _____
- A) "You don't need to make a decision about this right now."
 - B) "It sounds like you feel it is too much for you to finish now."
 - C) "It is probably too much for you to handle right now."
 - D) "If you put your mind to it, you could finish the program."
- 82) When evaluating the findings of a research publication, one of the questions a nurse needs to grapple with is which of the following? 82) _____
- A) "Are there any alternative explanations for the outcomes?"
 - B) "What are the credentials of the author?"
 - C) "Do I agree with the findings?"
 - D) "Was the author's research funding adequate?"
- 83) Identifying appropriate research subjects using the nursing diagnosis system is important because: 83) _____
- A) It ensures the selection of clients with a consensually defined problem in living.
 - B) Nursing diagnosis is superior to other diagnostic systems.
 - C) It is necessary to use nursing diagnosis if we want to conduct nursing research.
 - D) Nursing diagnosis is more accurate than other diagnostic systems.
- 84) The strongest evidence-base for practice is agreed to be: 84) _____
- A) Regulatory agency standards.
 - B) Qualitative studies.
 - C) Randomized clinical trials.
 - D) The consensus of experts.
- 85) The Transtheoretical Model (TTM) of change asserts that: 85) _____
- A) Change occurs when a logical need for change is presented.
 - B) Successful change involves action and thought only before the change.
 - C) Once change occurs, no additional intervention is necessary.
 - D) Progression of change is not linear.
- 86) Which of the following represents research evidence that is classified from weakest evidence to strongest evidence? 86) _____
- A) Case report; randomized controlled trial; non-randomized controlled trial
 - B) Randomized controlled trial; case report; consensus of experts
 - C) Randomized controlled trial; pretest and posttest; non-randomized trial
 - D) Case report; randomized controlled trial; systematic review of all relevant randomized, controlled trials

- 87) Which of the following is the best source of research evidence? 87) _____
- A) Practice standards in academic healthcare organizations
 - B) Evidence-based nursing sites online
 - C) Trial and error over an extended period of time
 - D) Nursing journals
- 88) In adopting evidence-based practice, the nurse: 88) _____
- A) Acknowledges that the process of change is identical for healthcare providers and consumers.
 - B) Acknowledges that the process of change for healthcare providers is different from the process of change for consumers.
 - C) Assumes that change can be immediate.
 - D) Acknowledges that once change occurs, it is permanent.
- 89) The nursing student states that evidence-based nursing interventions require the use of the most advanced technology. The nursing instructor knows that more teaching is necessary because evidence-based nursing implementations are based on: 89) _____
- A) Regulatory agency guidelines.
 - B) Research evidence, clinical expertise, and client preference.
 - C) What you were taught in nursing school supplemented by more recent literature.
 - D) The opinions of experts in the field.
- 90) In order to carry out evidence-based interventions in smoking cessation, it is important for the nurse to know that: 90) _____
- A) Smoking accentuates psychiatric symptoms.
 - B) Smoking increases medication side effects.
 - C) Smoking rates among the psychiatric population are two to four times the rate of the general population.
 - D) Smoking increases social isolation.
- 91) Evidence has shown that inviting musicians and dancers to perform for geropsychiatric clients: 91) _____
- A) Stimulates memories.
 - B) Enhances quality of life and provides stimulation.
 - C) Helps the time pass quickly.
 - D) Reduces boredom and restlessness.
- 92) The first step of engaging in evidence-based practice that involves critical thinking is: 92) _____
- A) Selecting appropriate measurements of change.
 - B) Measuring outcomes.
 - C) Assessing the need for change in practice.
 - D) Maintaining a change in practice.
- 93) The family of a client approaches a nurse on an inpatient mental health unit. They are concerned because the client is not responding to the prescribed treatment. The nurse explains that the client is being evaluated for other treatment options based on research and experience. The nurse knows that this use of evidence-based practice is to: 93) _____
- A) Reassure family members that healthcare staff is competent.
 - B) Prevent lawsuits.
 - C) Reduce hospital lengths of stay.
 - D) Achieve the best client outcomes.

- 94) Which of the following health care providers rely on evidence-based practice? 94) _____
A) Physicians B) All healthcare providers
C) Paraprofessionals D) Nurse practitioners
- 95) The best evidence for ensuring effective, individualized client care is produced by: 95) _____
Select all that apply.
A) Clinical expertise.
B) Client preference.
C) Hospital guidelines.
D) Healthcare policy.
E) Research results.
- 96) When evaluating research evidence upon which to base practice, the nurse knows that the most relevant research: 96) _____
A) Is any research that addresses the subject at hand.
B) Is carried out with subjects and in environments similar to those in the nurse's practice.
C) Is quantitative rather than qualitative.
D) Supports current practice.
- 97) Clinical trials may compare new and established medications, or medication vs. placebo. Drug trials that involve the use of placebos are: 97) _____
A) Necessary to save money for the newer, more expensive drugs.
B) Necessary to determine the effectiveness of a drug.
C) Unethical because everyone knows placebos are ineffective.
D) Unethical because they fool the client.
- 98) A client diagnosed with schizophrenia wants to stop taking antipsychotic medications and attempt to keep the illness in control with a strict vegetarian diet and meditation. Which nursing implementation represents application of evidence-based principles? 98) _____
A) Share with the client what we know about the importance of nutrition, stress management, and medication in the treatment of schizophrenia.
B) Tell the client there is no evidence that diet and meditation can control schizophrenia.
C) Ask what makes the client want to stop taking medication.
D) Ask what proof the client has that diet and meditation would work.
- 99) An important role for the nurse is providing clients with education about ways to manage their illness. Evidence-based practice can help because it allows the nurse to: 99) _____
A) Disengage and allow the client to make decisions independently.
B) Share what is known about techniques that help a client maintain recovery.
C) Engage the client in a logical discussion about what to do.
D) Tell the client what the client should do.
- 100) The outcome of an evidence-based practice system is often found in which of the following forms? 100) _____
Select all that apply.
A) Critical pathways
B) Case study series
C) Clinical algorithms
D) Cohort studies
E) Practice guidelines

- 101) In qualitative research studies, data are interpreted in a way that: 101) _____
- A) Can be used only to study client experiences.
 - B) Examines the qualities of an experience for the participants.
 - C) Are not important in establishing evidence-based practice.
 - D) Measures outcomes with numerical ratings.
- 102) Nurses need to evaluate readiness to engage in evidence-based practices. An important aspect of this evaluation is: 102) _____
- A) Asking their colleagues if they support evidence-based practice.
 - B) Accepting that regulatory bodies determine evidence-based practice.
 - C) Reading at least three psychiatric nursing textbooks written in the past five years.
 - D) Identifying available resources to obtain research evidence.
- 103) Which statement best describes a holistic- interactional approach to nursing care for clients with mental disorders? 103) _____
- A) "Developing comfortable relationships with clinicians is the major factor in maintaining mental health."
 - B) "Clients with psychotic symptoms rarely indicate an interest in creative activities."
 - C) "Medication is the only treatment required to manage affective symptoms for clients with mood disorders."
 - D) "I always try to understand the complex relationship between a client's psychobiologic health and expressions of self-esteem."
- 104) The nurse received the change-of-shift report on a 74-year-old woman admitted for depression. She has aphasia from a recent stroke and communicates minimally by using pencil and paper. Her college-aged grandson moved in with her to help with meals and household chores and a home health aide provides daily assistance with ADLs and medications. For the past week, she has refused to bathe, eats poorly, and has stopped writing. Which of the following statements best demonstrates that the nurse has the ability to plan holistic care for this client? 104) _____
- A) Sudden life changes, such as a stroke, usually lead to depression in older clients.
 - B) Reliance on the grandson and home health aide have decreased her feelings of self-worth and caused this episode of depression.
 - C) The client's psychobiologic health, rehabilitation, self-care potential, and discharge arrangements are interrelated.
 - D) The client's quality of life and prognosis are primarily related to her aphasia and inability to communicate.
- 105) When meeting with a client for the first time, the psychiatric-mental health nurse applying psychobiological principles is most likely to make which of the following statements? 105) _____
- A) "You have a brain lesion and can expect to be hospitalized many times over the course of your life."
 - B) "Your abnormal behavior is directly related to living in an unsupportive environment."
 - C) "We are thoroughly assessing your symptoms because an accurate diagnosis is the basis of your treatment."
 - D) "It is fairly certain that your children will feel stigmatized by their peers."

- 106) A nurse on a medical unit overhears a discussion about the failure of psychobiologic interventions for clients with mental disorders. Which statement could be made to counteract that supposition? 106) _____
- A) "Contemporary research findings indicate that the field of psychobiology and effective interventions is growing rapidly."
 - B) "There is a current moratorium on development of new drugs to correct biochemical imbalances in the brain."
 - C) "There are subjective reports that exposure to bright light and white noise provides effective treatment for mental disorders."
 - D) "Restriction of nutrients and non-nutrients is no longer believed to affect behavior."
- 107) The psychiatric-mental health nurse is asked to consult with an emergency room nurse about a client who has been refusing to cooperate with lab work for over four hours. The client appears frightened, answers questions reluctantly, and has no family present. Which response of the psychiatric-mental health nurse demonstrates a humanistic interactional approach to the situation? 107) _____
- A) "Have you offered medication for anxiety?"
 - B) "I would ask for a full psychiatric evaluation before discharge."
 - C) "Have you asked if the client wants to have a friend or family member to be here?"
 - D) "Give the client some time alone to decide whether or not to accept treatment."
- 108) The approach that helps a client develop insight is aligned with: 108) _____
- A) Cognitive behavioral theory.
 - B) Psychoanalytic theory.
 - C) Social—interpersonal theories.
 - D) Medical—psychobiologic theory.
- 109) A middle-aged parent goes to the emergency room for symptoms of dizziness, headache, and suicidal ideation. The nurse who assesses factors related to substance use, employment, child-rearing stressors, relationships with coworkers, recurring physical symptoms, and marital problems is: 109) _____
- A) Formulating a holistic-interactional assessment needed to interpret clinical data.
 - B) Failing to focus on the seriousness of the primary presenting problem.
 - C) Establishing rapport that will decrease the likelihood of suicide.
 - D) Doing more than the nurse's share of the interdisciplinary assessment.
- 110) A grieving widow tells a psychiatric-mental health nurse, "I feel so tired and alone." The nurse who incorporates an understanding of symbolic interactionism in practice *would not* suggest which of the following to the client? 110) _____
- A) "You seem sad. Can I sit with you for a while?"
 - B) "Try to get plenty of rest. Most people who suffer losses like yours need more sleep than usual to cope effectively."
 - C) "I would like to hear more about how you are feeling now."
 - D) "You had a terrible loss. Feeling tired and alone must be very difficult for you."
- 111) Sullivan's interpersonal theory focusing on the client's relationships with others and modes of interacting with others is most similar to the theory developed by: 111) _____
- A) Karl Menninger.
 - B) Sigmund Freud.
 - C) Emil Kraepelin.
 - D) B. F. Skinner.

- 112) The humanistic perspective on mental disorders implies that psychiatric-mental health nurses function in expanded roles. Which statement *does not* reflect this perspective? 112) _____
- A) Psychiatric-mental health nursing is involved in social goals that advance health holistically.
 - B) Psychiatric-mental health nurses are prepared to work for change within social and political systems.
 - C) Psychiatric-mental health nursing focuses on the client and does not deal with social or political consequences.
 - D) Psychiatric-mental health nurses develop philosophic and ethical frameworks to guide and evaluate the political outcomes of therapeutic intervention.
- 113) Which statement indicates that the nurse understands the developmental-interpersonal perspective of the self-system? 113) _____
- A) "A person's sense of security is primarily derived from doing well in school."
 - B) "Feelings of self-worth are established during infancy."
 - C) "Security is only achieved when a child discovers his or her autonomy."
 - D) "Childhood experiences influence the way people view and understand themselves."
- 114) Which of the following statements best reflects the nurse's comprehensive understanding of medical-psychobiologic theories? 114) _____
- A) Individuals suffering from emotional disturbances have complex personalities that require changes in their motivation and willingness to comply with treatment.
 - B) Mental disorders have characteristic structural, biochemical, and mental symptoms that can be diagnosed, run a characteristic course, and have a particular prognosis for recovery.
 - C) Mental disorders rarely respond to physical or somatic treatments.
 - D) Psychobiologic explanations of mental disorders do little to decrease the stigma associated with mental illness.
- 115) In comparing the major features of psychiatric theories, the nurse correctly concludes that: 115) _____
- A) Social-interpersonal and medical-psychobiologic theories are in direct opposition to the other.
 - B) Cognitive behavioral and psychoanalytic theories share the premise that behavior stems from the unconscious and requires the client to develop insight.
 - C) Social-interpersonal and medical-psychobiologic theories seek to change behavior through pharmacology.
 - D) Medical-psychobiologic and psychoanalytic theories focus on the individual client.
- 116) In explaining cognitive behavioral theory to a student, the nurse *would not* describe the concept of: 116) _____
- A) Psychic determinism.
 - B) Conditioned response.
 - C) Shaping.
 - D) Reinforcement.
- 117) The psychiatric-mental health nurse's scope of practice includes: 117) _____
- A) Exploring the meaning of life experiences such as birth and death, losses, life course changes, and human rights.
 - B) Establishing a routine for clients to manage basic life issues of eating, sleeping, grooming, and hygiene.
 - C) Developing a comfortable relationship with the client.
 - D) Identifying client reasons for failure to comply with recommended treatments.

- 118) Which statement indicates the psychiatric-mental health nurse understands the basic principles of symbolic interactionism in working with clients? 118) _____
- A) "Clients with altered brain chemistry need frequent reassurance that they should not worry about their condition."
 - B) "I try to avoid interventions that ignore the personal meaning of experiences to my clients."
 - C) "Clients with mental disorders are unlikely to understand the personal meaning of their experiences."
 - D) "After my first year of working in mental health, I was able to develop standardized interventions for clients with the same diagnoses."
- 119) The psychiatric-mental health nurse is asked to prepare an educational conference for unlicensed staff working in a day treatment program for hyperactive children with borderline intelligence. Using fundamental concepts of cognitive behaviorist theory, which of the following conference exercises would the nurse include? 119) _____
- A) Show a brief movie that demonstrates the simplicity of using behavior modification.
 - B) Have a contest to choose the best staff-designed time-out room where children can comfortably spend significant periods alone.
 - C) Include sessions for staff to practice talking with parents about the benefits of having their child transferred to an institutional setting where he or she would have access to highly trained experts.
 - D) Ask staff to work in teams to develop a token economy program that uses a prescribed daily routine and reinforcers for the children.
- 120) Erikson's eight developmental stages are most closely aligned with: 120) _____
- A) Sullivan's stages of interpersonal development.
 - B) Cognitive behaviorist concepts.
 - C) Maslow's theory of self-actualization and hierarchy of needs.
 - D) Freud's psychosexual stages.
- 121) The heart of the psychiatric-mental health nurse's therapeutic and caring role is characterized by: 121) _____
- A) Providing educational information about the client's mental illness.
 - B) Focusing on basic life issues of eating, sleeping, grooming, and hygiene as they relate to mental functioning.
 - C) Using the nurse-client relationship to support the client in exploring new definitions and actions for life situations.
 - D) Bringing unconscious childhood traumas into awareness.
- 122) Clients with visual hallucinations are experiencing problems in their: 122) _____
- A) Right frontal lobe.
 - B) Occipital lobe.
 - C) Parietal lobe.
 - D) Temporal lobe.
- 123) The client with a diagnosis of major depression tells the nurse that multiple generations of women in her family also suffered from depression. She states "I guess it is a family tradition to have problems dealing with stress." The nurse tells the client which of the following? 123) _____
- A) There is probably a shared stressful environment.
 - B) There is no evidence to suggest a familial occurrence of mood disorders.
 - C) Mood disorders do seem to have some basis in heredity among other contributing factors.
 - D) There is evidence to suggest that genotype is not influenced by stress.

- 124) During an assessment, the nurse identifies that the client is having problems learning from the past, difficulty dressing self, and cannot recognize written words. What brain structure dysfunction is exhibited by the client's inability to recognize written words? 124) _____
- A) Frontal lobe dysfunction
B) Occipital lobe dysfunction
C) Parietal lobe dysfunction
D) Temporal lobe dysfunction
- 125) A client is admitted to the medical surgical unit with a brain tumor. The nurse can anticipate that a client with a tumor in the frontal lobes will have problems with: 125) _____
- A) Sensory functions.
B) The ability to think and plan.
C) Memory and judgment.
D) Long-term memory.
- 126) The nurse is working with a client and family. When planning care, the nurse will consider principles underlying psychobiological research including which of the following concepts? 126) _____
- A) Understanding the role of neurotransmitters in the formation of behavior is valuable to nursing care.
B) The brain is relatively unchangeable after birth.
C) Mental illness is primarily considered to be a consequence of environment.
D) The brain is unresponsive to the environment.
- 127) Which statement describes the benefits of integrating psychobiology into nursing care? 127) _____
- A) A psychobiology approach will provide a theoretical framework from which to practice.
B) A psychobiology approach is utilized only by physicians.
C) A psychobiology approach enables the nurse to modify assessments, diagnoses, interventions, and evaluations of clients' response patterns.
D) A psychobiology approach is not compatible with the nursing process.
- 128) The nurse is providing discharge instructions to a client diagnosed with an anxiety disorder. What will the nurse tell the client about the activity of the amino acid gamma-aminobutyric acid (GABA), benzodiazepines, and the effect on anxiety? 128) _____
- A) GABA increases can be neurotoxic.
B) GABA is an inhibitory neurotransmitter.
C) GABA increases neuronal excitability.
D) GABA is an excitatory neurotransmitter.
- 129) An individual is subjected to chronic uncontrollable stress. What will be the effect on the client's neuroendocrine function? 129) _____
- A) Hyperactivity of the hypothalamic—pituitary—adrenal (HPA) axis and release of dopamine
B) Hypoactivity of the hypothalamic—pituitary—adrenal (HPA) axis and release of substance P
C) Hyperactivity of the hypothalamic—pituitary—adrenal (HPA) axis and release of substance P
D) Hypoactivity of the hypothalamic—pituitary—adrenal (HPA) axis and release of dopamine
- 130) During a medications management class, the nurse discusses the use of antipsychotic medications to treat psychosis. Which of the following statements indicate how these medications affect neurotransmitter activity? 130) _____
- A) Antipsychotics decrease the sensitivity of the receptor sites on the post-synaptic neuron.
B) Antipsychotics block dopamine receptors.
C) Antipsychotics increase the amount of dopamine in the post-synaptic neuron.
D) Antipsychotics increase dopamine receptors.
- 131) The immune system is a complex system of cells, proteins, and functional systems. When the brain directly influences the immune system, this can be interpreted as what field of study? 131) _____
- A) Neuroendocrinology
B) Psychoendocrinology
C) Immunology
D) Psychoneuroimmunology

- 132) A member of the client's family tells the nurse that they don't understand the choice of electroconvulsive therapy (ECT) for their mother's depression. The family member states they are worried about the damage her brain will incur from the grand mal seizure. What will the nurse teach the family members about ECT? 132) _____
- A) ECT is a safe and effective treatment option for depression.
 - B) They can withdraw consent at any time.
 - C) The induced seizure lasts less than a minute.
 - D) Grand mal seizures are not life threatening.
- 133) A client with a diagnosis of bipolar disorder asks the nurse what caused the illness. What should the nurse tell the client regarding the genetic transmission of bipolar disorder? 133) _____
- A) Bipolar disorder is caused by environmental factors.
 - B) There is no known cause for the development of bipolar disorder.
 - C) There appears to be a genetic link in the transmission of bipolar disease.
 - D) There is one single gene responsible for bipolar disorder.
- 134) A client who presents in the psychiatric unit tells the admitting nurse that he or she is very depressed and is having a hard time staying clean and sober. Which of the following describes the psychobiology of his or her illness? 134) _____
- A) Depression or other mental illness is an expected outcome of substance abuse recovery.
 - B) There is heritability and predisposition to alcohol dependence as well as complex environmental influences.
 - C) Depression or other mental illness should be treated with compatible medications.
 - D) Depression or other mental illnesses are symptoms of the substance abuse.
- 135) The nurse expresses ambivalence about the use of electroconvulsive therapy (ECT). How can this attitude influence client care? 135) _____
- A) This attitude may be communicated to the client and the family, hindering the nursing care.
 - B) The client may be unaware of the nurse's attitude.
 - C) The nurse's ambivalence will have no effect as long as the nurse is professional.
 - D) The nurse's attitude may spread to other staff members.
- 136) A client hospitalized for psychotic symptoms including auditory hallucinations and delusions of reference is prescribed a medication with a strong dopamine blocking action. The nurse teaches the client to recognize which symptom as a possible side effect of the medication? 136) _____
- A) Dry mouth
 - B) Orthostatic intolerance
 - C) Muscle stiffness
 - D) Constipation
- 137) The family of a client with a diagnosis of dementia of the Alzheimer's type (DAT) has expressed concern that they may inherit the disorder. The nurse tells the family which of the following? 137) _____
- A) There appear to be genetic links in the development of early onset DAT.
 - B) There are no genetic links.
 - C) There is evidence to suggest increased cerebral blood flow causes DAT.
 - D) There is evidence to suggest massive neuronal death causes DAT.
- 138) The advanced practice psychiatric nurse is preparing staff education on neurotransmitters. Which statement would be included in the teaching presentation? 138) _____
- A) Neurotransmitters and receptors do not vary in their affinity for each other.
 - B) Each neurotransmitter functions in the same manner.
 - C) Neurotransmitters consistently act in either an excitatory or inhibitory manner.
 - D) There are 2 classes of neurotransmitters.

- 139) The client says to the nurse, "I'm worried that this new antidepressant may not be working because I always feel tired after taking it in the morning." The nursing response should be based on what principle? 139) _____
- A) Antidepressants only have a stimulant effect.
 - B) Antidepressants can have a sedating effect.
 - C) Antidepressants that cause sedation are not effective.
 - D) Antidepressants that cause sedation usually cause tremors.
- 140) A fifteen-year-old client was depressed due to the loss of the client's mother and was placed on venlafaxine (Effexor). Two weeks later the client returns to the clinic and says, "I am feeling worse and have no hope." What nursing action is a priority? 140) _____
- A) Assess for suicidality.
 - B) Assess if the client is sleeping at night.
 - C) Evaluate how the client's other family members are coping.
 - D) Ask what the client enjoys.
- 141) A nurse planning a staff education session would correctly explain the role of psychopharmacologic treatment as which of the following? 141) _____
- A) Decrease clients' worst symptoms so that they do not require long-term treatment.
 - B) Promote clients' physiologic stability so that they can grow holistically.
 - C) Stabilize clients so that they can participate in psychoanalysis.
 - D) Manage clients so that they are happy and do not have to endure the stresses of everyday life.
- 142) In preparing for the treatment of a client only on the SSRI fluoxetine (Prozac), the nurse plans for which of the following? 142) _____
- A) A client with depression or obsessional thoughts
 - B) A client with memory deficits
 - C) A client with auditory hallucinations
 - D) A client with alcohol withdrawal or delusions
- 143) A client with a long history of schizophrenia is being switched from a conventional antipsychotic medication to a newer, atypical antipsychotic. The client asks, "I wonder why I am being switched since I have not had hallucinations for years. The psychiatrist said something about negative symptoms." Which response by the nurse is correct? 143) _____
- A) You must have heard wrong because medications would not be switched due to negative symptoms.
 - B) The conventional antipsychotic medications do not work well with positive symptoms, such as hallucinations.
 - C) Negative symptoms are those that interrupt your life, such as hearing voices or thinking that people are out to get you.
 - D) Newer antipsychotic medications work on hallucinations as well as negative symptoms, such as lack of motivation.
- 144) A nurse new to psychiatry asks her colleague why the newer atypical antipsychotic medications do not cause as many EPSEs as do the conventional antipsychotic medications. Which response, if made by the nurse, is correct? 144) _____
- A) The newer antipsychotics also have a muscle relaxing effect that masks the EPSEs.
 - B) The newer antipsychotics only act in the lower extrapyramidal dopamine pathways.
 - C) The newer antipsychotics have less affinity for dopamine receptors and also bind to serotonin receptors.
 - D) The newer antipsychotics do not impact dopamine.

145) A nurse in the inpatient unit says to the client, "I want to speak to you about the drugs you are taking, particularly the antipsychotic ones." After the client walks away without interacting, the nurse asks another nurse for suggestions. Which of the following would help the nurse improve this interaction? 145) _____

Select all that apply.

- A) Explain that you want to talk "with" the client not "to" the client.
- B) Set up an appointment with the client at least a day in advance of the discussion.
- C) State the name of the medication instead of the word *antipsychotic*.
- D) Have the psychiatrist speak with the client about medications since this is not a nursing role.
- E) Use the word medication instead of drugs.

146) The client with depression was started on flurazepam (Dalmane) and looks very tired after breakfast. What factors should the nurse assess related to the client's tiredness? 146) _____

Select all that apply.

- A) If the client has felt hung-over from this medication in the past
- B) If the client's TSH level is low
- C) The level of the client's depression
- D) The length and quality of the client's sleep
- E) If the client's blood pressure is elevated

147) The client who was taking zaleplon (Sonata) took about an hour to fall asleep the first night after it was discontinued. The client asks the nurse if this means that the client is addicted to the medication. Which nursing response is correct? 147) _____

- A) The client is addicted, but withdrawal is mild.
- B) There are no sedative-hypnotics that can be addictive.
- C) Usually the medication is tapered off over six weeks to prevent withdrawal.
- D) This medication is not associated with withdrawal symptoms.

148) What are the benefits of the newer nonbenzodiazepines as compared to the benzodiazepines for the treatment of insomnia? 148) _____

- A) Benzodiazepines do not induce sleep.
- B) Nonbenzodiazepines lead to more withdrawal.
- C) Nonbenzodiazepines do not produce as much hangover effect.
- D) Nonbenzodiazepines trigger a rebound effect.

149) The client with schizophrenia was started on imipramine (Tofranil) for a depressed mood and subsequently started hearing voices again and refuses to take the Tofranil because the client thinks it is poison. The nursing response is based on what information? 149) _____

- A) There is no evidence that tricyclic antidepressants trigger psychotic symptoms in susceptible clients.
- B) Often new antipsychotic medications like imipramine have paradoxical effects.
- C) Tricyclic antidepressants can trigger overt symptoms in someone with schizophrenia.
- D) MAOIs do not interact well with other antipsychotic medications and can cause worsening of symptoms.

- 150) The client who is recovering from schizophrenia has just seen the psychiatrist and tells the nurse that the Olanzapine (Zyprexa) is being reduced from 20 mg to 15 mg. This client asks the nurse why the Olanzapine is just not discontinued since the client has not had a hallucination for two months. Which nursing response to the client is correct? 150) _____
- A) "I think that you should call your psychiatrist and ask to discontinue the Olanzapine."
 - B) "This medication is gradually reduced and continued to prevent a relapse."
 - C) "I will check your serum level to see if it was too high and the reason for the reduction."
 - D) "The 20 mg of Olanzapine is above the recommended dose and was reduced due to the risk of toxicity."
- 151) A family member tells the nurse that much information is available on the internet about medications. This family member asks the nurse to explain what neurotransmitters are impacted by lithium. Which nursing response is correct? 151) _____
- A) Lithium interacts with GABA and opens the chloride channels.
 - B) Lithium raises the norepinephrine levels in the neural synapse.
 - C) Lithium increases the amount of dopamine available at the postsynaptic receptor.
 - D)
- 152) A mental health nurse is reviewing the post-test responses for a staff educational session that the nurse provided on the chronological development of psychiatric medications. Which of the following responses would indicate the participants understood the information correctly? 152) _____
- Select all that apply.
- A) The newer antidepressants, the SSRI group, have fewer side effects than the older antidepressants.
 - B) Each new type of psychiatric medication was developed due to a focus on a specific psychiatric illness and not due to chance.
 - C) The discovery of chlorpromazine (Thorazine) dramatically changed psychiatric treatment.
 - D) Few new psychiatric medications are needed due to the large number of safe and effective current medications.
 - E) The effectiveness of antidepressants has led to research resulting in a better understanding of brain biochemistry.
- 153) In order to plan for the care of a client on an acetylcholinesterase inhibitor, the nurse should assess for which of the following? 153) _____
- A) Level of depression
 - B) Memory impairment
 - C) Mania
 - D) Blood pressure
- 154) The white blood cell count of the client on clozapine (Clozaril) is 2.8. What action should the nurse take? 154) _____
- A) Monitor the client for orthostatic hypotension.
 - B) Hold the medication and call the psychiatrist.
 - C) Administer the medication and monitor the next count.
 - D) Check to see if the thyroid levels are normal.

- 155) A nurse manager is mentoring a junior nurse. The junior nurse models everything after the manager, and even dresses like the manager. How would the manager address the junior nurse's identification? 155) _____
- A) "I appreciate you wanting my help, but these plans have to represent your personal desires and goals."
 - B) "You can just have a copy of my plans."
 - C) "You're becoming too dependent on me. Can't you just think for yourself?"
 - D) "I'll be glad to look over your work after you come up with some of your own ideas."
- 156) A client has received some bad news about a prognosis from the physician. When the nurse comes in with medications, the client states in an angry tone, "You're late; I was just about to call the hospital administrator to complain." The nurse is aware that the client received a disappointing prognosis and understands the behavior as displacement. The nurse is silent for a few moments to let the client collect some thoughts and control any feelings. Which response should the nurse make next? 156) _____
- A) "You are really angry at your physician; why don't you tell the physician how you feel."
 - B) "I know you heard some bad news today. I wonder if that could be bothering you."
 - C) "I'm not late if I get this medication to you within twenty minutes of the scheduled time."
 - D) "You must be really angry at me."
- 157) A nurse is to assess a client's level of anxiety in order to determine how much of an anti-anxiety drug to administer prior to performing a painful dressing change for a deep tissue burn. Which question would give the nurse the most accurate assessment? 157) _____
- A) On a scale of 1 to 5, with one being none and 5 being panic, can you rate your level of anxiety right now?
 - B) How are you feeling today?
 - C) Are you ready for this change of dressing?
 - D) Did you find the medication helpful that you received before the dressing change yesterday?
- 158) A client who abuses alcohol states that the client drinks because the client's job is so stressful. Recognizing this as rationalization, the nurse makes a response to the client. The nurse would know treatment was effective when the client says which of the following? 158) _____
- A) "I can quit drinking whenever I want."
 - B) "If I took a less stressful job, I wouldn't have to drink."
 - C) "Maybe my 'just needing a little drink to do my job' has gotten way out of hand."
 - D) "Listen, I'm not a drunk, and I don't have a problem with alcohol."
- 159) A child with asthma was admitted to the hospital during an attack. The mother says, "This is all my fault, if only I hadn't smoked when I was pregnant." Which response would be helpful to the mother? 159) _____
- A) Tell the mother that she should feel guilty, and find out if she's still smoking.
 - B) Explain that asthma involves a host of biological factors, of which heredity plays a large role.
 - C) Tell her not to worry because her smoking did not cause the child's asthma.
 - D) Ask why she believes that she caused the child's admission.

160) A teen comes to the school nurse to get help with anxiety about singing in front of the school. The teen states, "I just know everyone is going to laugh. What if I sing off-key?" What does the nurse recognize as the teen's source of anxiety? 160) _____

- A) Inability to gain or reinforce self-respect from others
- B) Anticipated disapproval by significant others
- C) Discrepancies between self-view and actual behavior
- D) Unmet expectations important to self-integrity

161) A female client comes to the nursing clinic for a routine physical. When asked how she has been doing, she reports that she has been feeling very low since her youngest child left to attend dental school. She indicates that she has told herself to "just get over it" and find something to do. She has been telling herself that feeling so low is foolish since she is happy her daughter got into a good school. Which coping methods does the nurse recognize in the client's statements? 161) _____

Select all that apply.

- A) Seeking comfort
- B) Using symbolic substitutes
- C) Privately thinking it through
- D) Talking it out
- E) Relying on self-discipline

162) A community health nurse meets with a 15-year-old single mother to teach a tube-feeding technique to her infant. The teen's mother is present. The nurse notes that the young mother is hesitant to try the feeding technique and does not ask questions. During the feeding, the teen mother almost drops the feeding tube and is scolded by her mother for being clumsy. Based on this initial information, which nursing diagnosis is most appropriate? 162) _____

- A) Anxiety related to lack of knowledge and inexperience
- B) Social interaction impaired related to paternal interference
- C) Self-esteem (low) situational, related to lack of experience, criticism, and role uncertainty
- D) Ineffective family coping related to conflicted daughter-parent relationship and dysfunctional communication

163) A nurse is talking with the wife of a client who has terminal cancer. The wife is explaining what an ordeal it has been over the last six months. She states her diabetes is out of control and she feels tired and exhausted all the time. What risks does chronic stress present for the wife? 163) _____

Select all that apply.

- A) Risk for infection
- B) Risk for an auto accident
- C) Risk for mental illness
- D) Risk for stroke or heart attack
- E) Risk for fracture

- 164) A client with Crohn's disease is seen in the nursing clinic following a recent flare-up. The client describes herself as married with no children and a hard-working elementary school teacher. Which questions asked by the nurse are an important part of this client's assessment? 164) _____
- Select all that apply.
- A) "What can you tell me about your relationship with your husband?"
 - B) "How do you feel about yourself in general?"
 - C) "Do you consider yourself to be hard-driving, ambitious, and competitive?"
 - D) "How are things at work for you at present?"
 - E) "What sort of coping mechanisms do you usually use?"
- 165) A 22-year-old delivers a baby at home and calls the police who bring her to the psychiatric unit for an evaluation. The nurse learns that the mother is unwilling to accept the pregnancy and denies that she ever delivered a baby. The nurse continues to work with the client and establishes a trusting relationship. How should the nurse proceed in order to help the client? 165) _____
- A) Explore the protective functions of this behavior.
 - B) Discuss adoption proceedings.
 - C) Take the client to the nursery and show her the baby.
 - D) Avoid talking about babies or deliveries in the client's presence.
- 166) A nurse has been working with a client who witnessed a traumatic event and is now experiencing panic-level anxiety. The desired outcome is: 166) _____
- A) Hope for the future.
 - B) Absence of anxiety.
 - C) Anxiety maintained at a manageable level.
 - D) Stated improvement of self-esteem.
- 167) A client who abuses alcohol was brought to the hospital as a police hold after a fight with his wife. When the client is sober, the nurse recognizes that the client is using a defensive behavior called rationalization. Which statement did the client make? 167) _____
- A) "The police are always out to get me; I bet they were watching my house."
 - B) "I don't remember doing any of those things."
 - C) "When my wife comes in, tell her to take the money I left in the hospital safe."
 - D) "I just needed my space. If she had just left me alone, I wouldn't have hit her."
- 168) A client diagnosed with a brain tumor is considering whether or not to have surgery after the physician explains that possible responses might include stroke, facial paralysis, and other mobility-limiting events. A few hours after signing the consent form, the client anxiously calls the nurse to withdraw consent, and then reverses the decision again a few moments later. This behavior continues over the next several hours. How should the nurse understand what is going on with this client? 168) _____
- A) The client is refusing surgery.
 - B) The client does not have adequate information to make a decision.
 - C) The client is vacillating regarding the decision for surgery.
 - D) The client is undergoing stress.

- 169) A nurse is working with a student on the acute care psychiatric unit. The student asks the nurse why it is important to assess clients' values when there are many other more important issues to attend to. The nurse's reply should emphasize which of the following? 169) _____
- A) Ensure that clients' values are congruent with nurses' values.
 - B) Values regarding health are common across many cultures.
 - C) Health behaviors are strongly influenced by personal values.
 - D) Values form the scientific .XA for health behaviors.
- 170) Epidemiological studies indicate that less than half of individuals with 3 or more mental disorders sought specialty mental health treatment. What factor may be contributing to this problem? 170) _____
- A) Diminished severity of illness
 - B) Lack of preventative outreach services
 - C) Aging population
 - D) Lack of tertiary programs
- 171) A nurse is working at a health care clinic serving the needs of the homosexual community. A neighbor says the nurse must be brave because most of "those" people have AIDS. What would be the nurse's best response? 171) _____
- A) "Hey, it's a job like any other job. All jobs have problems."
 - B) "It's okay because I'm not intimate with any of the clients."
 - C) "That's an unfortunate stereotype. Can we talk about the reality?"
 - D) "It's very difficult for me when you discriminate like that."
- 172) The nurse is planning to incorporate principles of epidemiological psychiatry into her nursing practice. Which step should the nurse prioritize? 172) _____
- A) Assess care-seeking patterns related to the use of mental health services.
 - B) Predict the future needs of this population.
 - C) Evaluate the effect of preventive and therapeutic measures.
 - D) Identify groups of people at high risk for the development of specific psychiatric disorders.
- 173) Clients who experience sexual assault often experience increased rates of mental disorder. Which risk factor would apply to a client who had been sexually assaulted? 173) _____
- A) Ethnicity
 - B) Physical environment
 - C) Social class
 - D) Social environment
- 174) A nurse is meeting with a Cuban family in which the wife abuses alcohol. During the family assessment meeting, the nurse observes that the husband speaks for the wife and other family members when the nurse is directing questions towards them. The husband says, "I am responsible for my family." What cultural values should the nurse consider when planning care for this client? 174) _____
- A) Health care decisions will involve the wife only.
 - B) Health care decisions may be made by the husband.
 - C) Health care decisions will involve the entire family.
 - D) Health care decisions may have to be made when the client's husband is not present.

- 175) Wildfires have devastated large parts of a rural county. General health practitioners in the county have noticed an increase of clients presenting with stress-related disorders. Applying principles of psychiatric epidemiology, which of the following is true regarding the presentation of stress-related disorders following this traumatic event? 175) _____
- A) When seeking treatment, most people with mental disorders seek treatment from psychiatrists.
 - B) Awareness of care-seeking patterns is essential in order to address use of mental health services.
 - C) Individuals with chronic mental disorders do not seek treatment.
 - D) Most people with mental disorders seek professional treatment.
- 176) The nurse is caring for a client from a different cultural background. The client has difficulty expressing beliefs about the treatment plan to the physician. Which nursing action would be most appropriate for this client? 176) _____
- A) The nurse should encourage the client to discuss concerns with the client's spouse so that the spouse can tell the physician.
 - B) The nurse should act as the cultural broker to bridge the gap between the client and the physician.
 - C) The nurse should encourage the client to accept the plan of care as ordered.
 - D) The nurse should encourage the client to speak up when the physician is present.
- 177) A 19-year-old Native American client is admitted with a diagnosis of major depression with suicidal ideation. What assessment can be made? 177) _____
- A) The client will benefit from a talking circle.
 - B) The client is at high risk for suicide.
 - C) The client will need a single room.
 - D) The client will need a medicine man.
- 178) The nurse is learning how to identify populations at risk for developing mental disorders. Which of the following statements by the nurse would reflect that learning has taken place? 178) _____
- A) "All poor people have mental illness."
 - B) "Mental illness only occurs to weak individuals."
 - C) "Men do not experience depression."
 - D) "Married women with a family history of depression are at an increased risk of developing depression."
- 179) Which of the following nurses exhibits cultural sensitivity? 179) _____
- A) The nurse who does not feel comfortable allowing the Muslim client to pray during the day.
 - B) The nurse who develops a knitting group for clients.
 - C) The nurse who develops a teaching group titled "Anti-oxidants for Life."
 - D) The nurse who learns a second language and attends cultural events to increase his or her awareness.
- 180) The nurse makes certain that a client who is Catholic is able to attend Mass on Sunday. The nurse has determined the client's religious practices from the assessment. This is an example of: 180) _____
- A) Culturally competent care.
 - B) Cultural blindness.
 - C) Ethnocentrism.
 - D) Differential treatment based on spiritual beliefs.

- 181) The nurse and a client talk about the signs and symptoms of acute mania. The client says, "When I am feeling really good and don't need to sleep, I know I am manic." The nurse recognizes that this experience is indicative of which of the following stages of the natural history of disorder? 181) _____
- A) Stage of clinical disorder
B) Stage of disability
C) Stage of presymptomatic disorder
D) Stage of susceptibility
- 182) The student nurse asks why the nurse is documenting the client's nonverbal responses in addition to verbal responses during the initial assessment. Which of the following statements made by the nurse reflects the rationale for documenting both verbal and nonverbal responses? 182) _____
- A) "It is important to be thorough when documenting."
B) "Documenting both permits the reader to compare the behaviors for congruence."
C) "Charting verbal and nonverbal helps me remain objective."
D) "It is the hospital policy to document both."
- 183) A working goal for the nurse-client relationship is to achieve: 183) _____
- A) Interdependence.
B) Facilitative intimacy.
C) Social superficiality.
D) Self-disclosure.
- 184) During a nurse-client interaction, the client tells the nurse, "I don't think I can deal with feeling so sad much longer." The nurse's best response is which of the following? 184) _____
- A) "Is there a history of depression in your family?"
B) "Are you saying you feel sad?"
C) "Tell me about your feelings of sadness."
D) "We all have times of sadness."
- 185) The nurse is documenting observations of client interactions during a group session. The nurse strives to document the behaviors of the client interactions with: 185) _____
- A) Objectivity.
B) Sympathy.
C) Serendipity.
D) Empathy.
- 186) Which of the following is an example of clarifying a client's verbal response? 186) _____
- A) "See, the medicine does work."
B) "Everything seems to work out eventually."
C) "Are you saying you feel the medicine is helping you?"
D) "I knew it would work; it just takes time."
- 187) In planning care for a client who is gaining mental stability, the nurse develops measures to confirm the client's view of self. Which of the following responses made by staff would be categorized as disturbed communication? 187) _____
- A) "You are wrong."
B) "Do you want to try that again?"
C) "How might you go about that differently?"
D) "I do not understand what you are telling me."
- 188) Which of the following interventions promotes mindful listening in any health care setting? 188) _____
- A) Encouraging the family to step outside before assessing the client
B) Telling the client to get off the phone
C) Asking clients what they would like to drink when taking medication
D) Turning off the television before interviewing a client

- 189) The nurse is developing a plan of care for a client. Which of the following interventions must the nurse be careful to avoid? 189) _____
- A) Selecting interventions that conflict with the client's value system
 - B) Addressing issues related to the client's past experiences
 - C) Identifying the client's perception of the problem
 - D) Discussing expectations with the client
- 190) The nurse is validating what was observed before documenting in the progress note. Validation is used as a mechanism to ensure which of the following? 190) _____
- A) The client's need for further intervention is understood.
 - B) The client's request is clarified.
 - C) The client's affect is appropriate to the situation.
 - D) The client's perception of the response is communicated.
- 191) A client states, "I just know my brother will not come back from the war." Which of the following examples would be used to encourage the client to explore this concern? 191) _____
- A) "Maybe he will be one of the lucky ones."
 - B) "What do you feel will happen to him?"
 - C) "Where is your brother going?"
 - D) "How do you know this?"
- 192) The nurse observed that during a teaching session, the overall emotional tone of a client remained unchanged. The nurse documents this as: 192) _____
- A) Flat affect.
 - B) Muted behavior.
 - C) Incongruent verbal and nonverbal responses.
 - D) Affect that has range.
- 193) The nurse observes behavior of a member of the mental health team that seems to indicate the team member is primarily interested in clients' progress as a measure of that particular team member's knowledge and expertise. Given the nurse's knowledge of game theories, this team member might be functioning as a: 193) _____
- A) Leader.
 - B) Enabler.
 - C) Rivalist.
 - D) Maximizer.
- 194) The client with a mental illness is asking questions about prevention of sexually transmitted diseases. Given the *Psychiatric - Mental Health Nursing Standards of Practice*, which action would be most appropriate for the nurse to take at this time? 194) _____
- A) Notify the attending psychiatrist.
 - B) Teach safer sexual practices.
 - C) Investigate the questions in individual psychotherapy.
 - D) Consult with the mental health care team.
- 195) Upon arrival on the psychiatric unit this morning, which activity should be the focus of the nurse? The nurse should: 195) _____
- A) Identify community resources for clients to be discharged this morning.
 - B) Schedule the individual therapy sessions for all clients.
 - C) Review psychological testing results for all clients.
 - D) Assess each client for whom the nurse will be providing care.

- 196) A client asks the nurse if it is "OK" to pray for recovery. Which response best conveys the nurse's ability to be a spiritual activist for the client? 196) _____
- A) "Clients in psychiatric hospitals often experience spiritual crises that require prayer."
 - B) "It's not advisable to focus only on prayer as a means to recovery."
 - C) "Spiritual practices, such as praying, can nurture one's spirit and enhance healing."
 - D) "It's acceptable for clients to pray in the hospital chapel."
- 197) The nurse is caring for a client who repeatedly talks about the role of spirituality in curing depression. Which approach best demonstrates the nurse's acceptance of the client? 197) _____
- A) Share opinions regarding the role of spirituality in daily life.
 - B) Ignore the client's focus on spirituality.
 - C) Listen to the client in a supportive manner.
 - D) Encourage the client to consider other curative factors.
- 198) The nurse is seeking supervision regarding the use of self-disclosure with a client who has anxiety. Which response by the nurse most accurately reflects an understanding of the therapeutic use of self-disclosure? 198) _____
- A) "I can use self-disclosure with any client as long as it doesn't take the focus away from the client."
 - B) "Nurses who disclose personal information must first undergo psychotherapy to prevent over-disclosure."
 - C) "There are really few circumstances in which it is appropriate for nurses to use self-disclosure with clients."
 - D) "I will first ask myself whether what I am going to disclose meets the client's needs or just my own needs."
- 199) The nurse is caring for a newly admitted client who has not showered in several days and emits an offensive odor. Which of the following actions best conveys respect for the client? 199) _____
- A) Assess the client's abilities and needs related to performing self-care.
 - B) Be honest with the client about how his or her appearance affects others.
 - C) Ignore the client's body odor to minimize causing humiliation.
 - D) Explain unit expectations regarding activities of daily living to the client.
- 200) A woman has been living in a shelter with her children after escaping her abusive husband. Her move-out date is getting closer. She states, "I'm afraid to leave here. I'm afraid for my safety and the safety of my children." Which response by the nurse most accurately conveys empathy? 200) _____
- A) "Even though you are scared, it's the policy that you have to leave. It's unfortunate, but there's nothing I can do."
 - B) "We learned your husband has moved out of state. I don't think you have anything to worry about now."
 - C) "You've had a month to come up with a plan for keeping you and your family safe. Let's review your options."
 - D) "This is a difficult and scary transition. Let's work on developing a plan to keep you and your family safe."

- 201) The nurse finds the client crying in the room. The client states, "I'm so sad and lonely. I'm sitting here crying like a baby." Which of the following responses best reflects the nurse's sensitivity towards the client? 201) _____
- A) "Don't worry about crying. I think you are a fine person."
 - B) "Are you feeling embarrassed because you are crying?"
 - C) "It's a gray, rainy day. A lot of clients are feeling sad."
 - D) "Why don't you come to the dayroom to be with others?"
- 202) According to Prochaska, a client who is considering eliminating caffeine from his diet is in the contemplation stage of change. The most appropriate intervention at this stage is to: 202) _____
- A) Recommend that the client begin gradually reducing caffeine intake.
 - B) Talk about the client's reasons for wanting to reduce caffeine intake.
 - C) Advise the client to continue caffeine intake until psychiatric symptoms are stabilized.
 - D) Encourage the client to discontinue caffeine intake.
- 203) Research has shown that the most effective smoking cessation programs include which of the following characteristics? 203) _____
- A) Consist of brief smoking cessation advice given during a general checkup
 - B) Can be as brief as 15 minutes
 - C) Span a period of time
 - D) Consist of giving a client a self-help pamphlet on smoking cessation
- 204) Smoking is a common unhealthful behavior among mental health clients. To help a client who wants to stop smoking, the nurse guided by evidence-based practice will: 204) _____
- A) Provide the client with information about tobacco dependence.
 - B) Limit the number of cigarettes smoked during hospitalization.
 - C) Establish a ban on smoking.
 - D) Tell the client to stop smoking.
- 205) According to Prochaska, in the precontemplation stage of change the client: 205) _____
- A) Is considering changing behavior.
 - B) Has no intention of changing behavior.
 - C) Has changed behavior and needs to maintain the change.
 - D) Is actively changing behavior.
- 206) Which of the following critical thinking skills is necessary when engaging in evidence-based practice? 206) _____
- A) Determining whether the study is qualitative or quantitative
 - B) Deciding if you agree with the findings
 - C) Evaluating the strength of research evidence
 - D) Comparing what you learned in nursing school with the findings
- 207) Randomization refers to the method of randomly: 207) _____
- A) Selecting a research topic.
 - B) Assigning selected research subjects to either the experimental or control group.
 - C) Selecting either a qualitative or quantitative research design.
 - D) Selecting research subjects from a larger population.

- 208) Randomly assigning research subjects is important because it: 208) _____
- A) Ensures that each research subject will receive the best treatment.
 - B) Reduces bias.
 - C) Reduces risk to the research subject.
 - D) Ensures similarity between the control and experimental group.
- 209) An important finding of recently conducted research is that: 209) _____
- A) Spirituality is unrelated to mental health and has no role in psychiatric treatment.
 - B) Spirituality can be an active treatment area in psychiatric care.
 - C) Spirituality is antithetical to the scientific basis of psychiatric treatment.
 - D) Spirituality is a topic that is best avoided in psychiatric treatment due to the potential for conflict, guilt, and shame associated with religion.
- 210) Which of the following statements best distinguishes randomized clinical trials from other research forms? 210) _____
- A) They are less likely to be influenced by opinion or bias.
 - B) They ensure that research subjects are informed.
 - C) The researchers assign the best interventions to clients most able to benefit.
 - D) They are the most cost effective research design.
- 211) Nursing roles associated with shifts in the delivery of psychiatric services to social and community settings *would not* include: 211) _____
- A) Providing individual therapy in a private practice setting.
 - B) Providing case management as part of an interdisciplinary team.
 - C) Participating as a member of a community board for social planning activities.
 - D) Leading community support groups for couples receiving genetic counseling.
- 212) Which statement made by a nurse indicates an understanding of the basic premises of psychobiology? 212) _____
- A) "Genetics, immunology, biorhythms, brain structure, and brain biochemistry all influence mental disorders."
 - B) "Because of the advances in psychobiology, the role of psychiatric-mental health nurses focuses primarily on medication monitoring."
 - C) "All mental disorders can now be fully classified and cured with biological interventions."
 - D) "By focusing on the biologic sciences, we will diminish the art of psychiatric—mental health nursing."
- 213) The psychiatric-mental health nurse understands that the philosophy underlying humanistic practice means which of the following? 213) _____
- A) The model for intervention and change requires that the nurse feel comfortable confronting clients when they resist treatment goals.
 - B) Nurses must develop interests related to human beings, wherever they live and whatever their status or culture, in order to work for change within social and political systems.
 - C) The nurse must be cautious about empowering clients as they may make poor choices that impede their progress.
 - D) Client and family education about the mental disorder and its treatment must be provided only when clients are stable enough to accept their illness.

- 214) The nurse who applies a conceptual framework that integrates the biologic and social sciences with the physical sciences in assessing clients is using: 214) _____
- A) Erickson's eight stages of development.
 - B) General systems theory.
 - C) The medical model.
 - D) Social interactionism.
- 215) Which one of the following statements *is not* consistent with psychoanalytic theory? 215) _____
- A) Psychoanalytic therapy focuses on a dynamic view of mental phenomena rather than on the classification of illness.
 - B) Psychic determinism means that no behavior is accidental.
 - C) Psychoanalysis deals with the conscious mind.
 - D) The structural model of the mind contends that the id, ego, and superego have specific interrelated functions.
- 216) Concepts of interactionism are evidenced in which of the following statements the nurse makes to the parent of an adolescent hospitalized for an overdose of cocaine and Valium? 216) _____
- A) "All behavior has meaning, so we will focus on trying to understand the meaning of the drug use as well as the occurrence of overdose."
 - B) "Adolescence is such a painful time. Rehabilitation programs give kids a chance to get away from their everyday pressures."
 - C) "Use of Valium probably means your child accidentally overdosed by trying to treat the effects of cocaine."
 - D) "Peer pressure is usually responsible for these accidental overdoses."
- 217) A holistic view of the mind—body relationship is best demonstrated by which of the nurse's comments to a student nurse? 217) _____
- A) "We might as well be working on a medical unit. We focus mostly on medication management now."
 - B) "My view is that clients have physical problems that have emotional consequences and psychological issues that cause physical problems."
 - C) "Clients come and go so quickly, we can't always complete a thorough physical exam."
 - D) "Psychiatric clients often blame their problems on the side effects of the medications."
- 218) When providing orientation to a group of students, the psychiatric-mental health nurse describes use of an eclectic clinical approach with newly admitted clients with a diagnosis of schizophrenia. Which of the following statements most accurately reflects the therapeutic value of an eclectic approach? 218) _____
- A) Strategies from one or a combination of psychiatric theories are used to determine interventions and evaluation criteria for working with each client.
 - B) There is limited scientific evidence about treatment for schizophrenia, so a variety of medications and interventions must be tried over time.
 - C) It is difficult to determine a final plan of care for new clients with psychotic disorders.
 - D) Nurses do not need a philosophy of care to direct their practice.
- 219) When planning care for clients, the nurse using principles of humanism would consider which of the following? 219) _____
- A) The mind-body relationship focuses on biological explanations of illness.
 - B) Clients rely on providers to develop solutions for their problems.
 - C) Clinical interventions are most effective when they focus on the current actions, feelings, and concerns of clients.
 - D) Emotional stress has a relationship to physical symptoms.

- 220) The nurse is assessing the client for signs and symptoms of brain dysfunction. If the limbic system function is disrupted, you expect the client to have difficulty with: 220) _____
 A) Auditory hallucinations. B) Vital life functions.
 C) Consciousness. D) Emotional responses.
- 221) A client is hospitalized for psychotic symptoms including auditory hallucinations and paranoid delusions. Based on an understanding of neurobiology, the nurse knows the psychotic symptoms arise from disruptions in which neurotransmitter? 221) _____
 A) Serotonin B) Acetylcholine
 C) Dopamine D) Norepinephrine
- 222) When focusing on psychobiology, what is most important for the client's family to understand? 222) _____
 A) The client's symptoms B) The client's phenotype
 C) The client's medication regimen D) The underlying neurobiology of behavior
- 223) A client tells visiting family that a test was done to see how the client's brain was functioning. The family asks the nurse if there really is such a test. The nurse realizes that the client had which type of test? 223) _____
 A) Positron emission test (PET)
 B) Magnetic resonance imaging (MRI)
 C) Computerized tomography (CT)
 D) Single photon-emission computed tomography (SPECT)
- 224) A client is administered the dexamethasone suppression test (DST), which attempts to assess the hypothalamic—pituitary—adrenal (HPA) axis. How will the results of the test be used? 224) _____
 A) To identify appropriate treatment
 B) To diagnose psychiatric illness
 C) To identify genetic predisposition
 D) To identify pathology in the HPA axis function
- 225) A new nurse in a psychiatric program tells the charge nurse "I'm not sure I feel safe working with all of these crazy people." Select the best reply by the charge nurse. 225) _____
 A) "Don't worry, you'll get used to it."
 B) "It sounds like you need to discuss your feelings with the clinical supervisor."
 C) "Maybe you should consider transferring to a medical-surgical floor."
 D) "Believe me, it is not safe to work with some of these clients."
- 226) An involuntary client being treated for an acute exacerbation of paranoid schizophrenia refuses the morning dose of medication. The nurse is frustrated and wonders if the client will ever develop insight. What aspects of psychobiology could help reframe the client's behavior for the nurse? 226) _____
 A) The frontal and parietal lobe involvement in schizophrenia can cause an unawareness of the illness or the need to take medications.
 B) Adhering to the client's medication regimen is a priority to the nursing care.
 C) The client's brain chemistry is altered and medications will help.
 D) The client is not responsible for the behavior.

- 227) Stress-related symptoms account for 60% of all primary care visits. What are the implications for practice? 227) _____
- A) An understanding of stress will allow us to identify integrative treatments.
 - B) An understanding of how stress influences disease will allow us to identify appropriate treatments.
 - C) An understanding of stress will allow us to identify clients at risk of mental illness.
 - D) An understanding of stress will allow us to teach clients stress reduction techniques.
- 228) The client of Asian extraction asks the nurse why the client's own dose of antipsychotic medication is effective yet so much lower than other clients who are mostly from European extraction. Which nursing response is correct? 228) _____
- A) There is no correlation between ethnic background and the amount of medication someone receives.
 - B) People of Asian extraction have higher expressed emotionality leading to better prognosis and lower dosages.
 - C) Often people of Asian extraction have lower metabolic rates and need lower amounts of medication.
 - D) People of European extraction have more side effects from medication than do those of Asian extraction.
- 229) The nurse evaluates which of the following client statements as validation that the teaching on lithium was effective? 229) _____
- A) I will have my blood levels checked every 2 to 3 months.
 - B) I will quit taking lithium if I get depressed.
 - C) I will restrict fluids to 100 ml per 8 hours.
 - D) I will have liver function tests every 6 months.
- 230) An older client with mild dementia of the Alzheimer's type is started on donepezil (Aricept). The client's daughter asks the nurse how long it will take for her mother to be cured. Which response by the nurse is correct? 230) _____
- A) It takes about two weeks for the neurochemical cure to occur.
 - B) As long as she continues to take the medication, she will be symptom-free but not cured.
 - C) Cure rates vary by individuals and will take about six weeks to determine.
 - D) The medication will improve her memory but not cure the dementia.
- 231) The client reports that the medication must be effective since the hallucinations are now markedly diminished. The nurse documents that the client is responding positively to which of the following medications? 231) _____
- A) Zolpidem (Ambien)
 - B) Olanzapine (Zyprexa)
 - C) Methylphenidate (Ritalin)
 - D) Paroxetine (Paxil)
- 232) Because venlafaxine (Effexor) increases norepinephrine, the nurse assesses for what symptom in the client, especially when the client is on the higher doses of this medication? 232) _____
- A) Elevated blood pressure
 - B) Sedation
 - C) Hypothermia
 - D) Bradycardia
- 233) When the nurse reviews the effectiveness of the client's lithium level, the nurse should take into account which of the following client factors? 233) _____
- A) Marital status
 - B) Weight
 - C) Gender
 - D) Ethnicity

- 234) The client with bipolar disorder has been on lamotrigine (Lamictal) for three years and has had a stable mood for one year and asks what the risks would be of just stopping all the lamotrigine at once. Which nursing response is the most important point? 234) _____
- A) Stopping this medication could trigger a panic attack.
 - B) Stopping this medication is usually not problematic.
 - C) Stopping this medication may trigger headaches.
 - D) Stopping this medication abruptly carries the risk of seizures.
- 235) A client with newly diagnosed breast cancer states that her fate is in God's hands and that she will accept whatever the future holds. The nurse is aware that a sense of coherence helps people cope successfully with life's challenges, but the nurse is concerned about the woman's continuation with medical treatment. What might the nurse think is lacking in this client's coping? 235) _____
- A) She seems to have lost hope.
 - B) She is expressing that she does not have the resources to meet the demands of her illness.
 - C) She does not appear to be demonstrating motivation or feeling about investing time and energy in life.
 - D) She does not seem to have a basic trust that things will work out.
- 236) A nurse is leading a support group for girls who were sexually abused by their stepfathers. Each girl made a statement to the group about the experience. The nurse recognizes intellectualization in one of the girls' remarks. Which statement did the girl make? 236) _____
- A) "I don't think my stepfather meant me any harm."
 - B) "Sexual abuse happens all of the time in families with stepfathers."
 - C) "If my mother hadn't married him, it never would have happened."
 - D) "I can't remember much of the details."
- 237) A team meeting is scheduled to teach nurses about communicating with clients who are using defense mechanisms. The instructor understands that more teaching is needed when a nurse says which of the following? 237) _____
- A) "Defense mechanisms are used when you feel threatened or anxious."
 - B) "People use defense mechanisms every day, though they are not aware of it."
 - C) "Primitive and early-formed defenses would be stronger and more difficult to change."
 - D) "Defense mechanisms are not helpful and must be challenged."
- 238) During a peer group support session, a teenager shares that her little sister destroyed a valued collection of glass animals. Another member of the group says, "I would have killed her." The teenager quickly denies angry feelings towards the little sister and states, "She didn't do it on purpose." This is an example of the defense mechanism of: 238) _____
- A) Identification.
 - B) Intellectualization.
 - C) Reaction formation.
 - D) Projection.

- 239) A home care nurse is teaching an older client about colostomy care. The client's wife is taking charge of the irrigations. Both are very anxious. During the procedure, the wife continually watches the nurse, asking "Is this correct?" and waits for approval before continuing. Both the client and his wife express how glad they are that the nurse is coming and that they don't know what they will do without the help. Knowing that the goal of care is to promote independence, how will the nurse address these behaviors? 239) _____
- Select all that apply.
- A) Reinforce the wife's competency and the strength of coping as a team.
 - B) Remind the couple that there are only a few visits left.
 - C) Tell the husband he has to do the irrigation.
 - D) Gradually encourage them to do the procedure on their own, while continuing to provide support.
 - E) Recognize this passive behavior and take a firm stand against it.
- 240) A nurse determines that a client slated for a cardiac procedure in the morning is experiencing severe anxiety. Which behavior was observed? 240) _____
- A) The client cannot remember what has been taught about post-operative breathing.
 - B) The client is reading today's newspaper and makes small talk about a current event.
 - C) The client thinks the hospital is a prison and says the jailers have taken the client's clothes.
 - D) The client keeps asking about blood clots despite the nurses repeated answers.
- 241) A nurse interviews a Chinese client who has been given a diagnosis of schizophrenia. The family is present during the interview. Which cultural values should the nurse consider as she prepares to interact with the client and family? 241) _____
- A) Medicine men
 - B) Talking circles
 - C) Fatalism
 - D) Kinship solidarity
- 242) When focusing on the stage of susceptibility, what is most important for the client to know? 242) _____
- A) Identify individual risks.
 - B) Acknowledge vulnerability to the disorder.
 - C) Recognize that most risks cannot be modified.
 - D) View the disorder as inevitable.
- 243) A client is admitted to a medical-surgical unit after abdominal surgery. The nurse is assessing the client for pain. In order to provide culturally competent care, the nurse should not: 243) _____
- A) Assume that all clients will verbally express their pain and ask for medication.
 - B) Abstain from stereotyping a client's pain responses based on the person's culture.
 - C) Acknowledge that each client holds various beliefs about pain.
 - D) Respect the client's right to react to pain in whatever manner desired.
- 244) A client is the single parent of 3 children under the age of 6. The client is currently unemployed and receives government assistance. The client reports a positive family history for depression. The nurse recognizes that this experience is indicative of which of the following stages of the natural history of disorder? 244) _____
- A) Stage of disability
 - B) Stage of clinical disorder
 - C) Stage of susceptibility
 - D) Stage of presymptomatic disorder

- 245) A new nurse is oriented to a position in a community health center that serves a diverse client population. The new nurse says, "The first thing I need to do is learn everything possible about all the cultures of the clients." What is the best response staff can give the new nurse? 245) _____
- A) "You should always be nonjudgmental."
 - B) "This will come with time as you get to know clients and then encounter problems."
 - C) "You need to first understand who you are."
 - D) "I will give you a great book that describes all of the critical factors."
- 246) A nurse practitioner works in a low income health clinic in a large urban city. Almost 25% of the nurse's practice consists of female clients diagnosed with mood disorders. Among the male clients in her practice, only 7% have been diagnosed with mood disorders. Epidemiological studies indicate that: 246) _____
- A) Women have higher rates of affective disorders than men.
 - B) Women have higher rates of substance abuse than men.
 - C) Men have higher rates of affective disorders than women.
 - D) The rates of affective disorders are equal between genders.
- 247) A nurse acknowledges feeling anxious about meeting new people. By acknowledging feelings to the client, the nurse is demonstrating: 247) _____
- A) sympathy.
 - B) empathy.
 - C) superficiality.
 - D) genuineness.
- 248) A client is admitted to the psychiatric unit exhibiting behaviors indicating a high level of anxiety following a personal crisis. Which of the following communication skills should the nurse utilize when interacting with this client? 248) _____
- A) Closed-ended questions
 - B) Open-ended questions
 - C) Providing the client with advice
 - D) Providing reassurance
- 249) In the immunization clinic, the nurse notices a client displaying tense body posture. Which of the following is the most therapeutic response for the nurse to make? 249) _____
- A) "I notice you are clenching your fists."
 - B) "You need to relax."
 - C) "I can tell you've had a bad experience before."
 - D) "This won't hurt a bit."
- 250) The nurse engaged in a therapeutic relationship with a client uses nonverbal communication to: 250) _____
- A) Enhance verbal messages.
 - B) Detract from verbal messages.
 - C) Terminate the therapeutic relationship.
 - D) Avoid the use of verbal messages.
- 251) Which of the following communication theories provides the most appropriate rationale for a nursing intervention to utilize the perceived strengths of the client in promoting effective communication? 251) _____
- A) Neurolinguistic Programming Theory
 - B) Therapeutic Communication Theory
 - C) Theory of Communication Levels
 - D) Behavioral Effects and Human Communication Theory

- 252) Humanism is a philosophy of service to benefit humanity through applying which of the following concepts? 252) _____
- A) Limitations of life in today's world have little effect on planning effective interventions.
 - B) Caring practices and compassion must be approached holistically.
 - C) Science is the core consideration of humanistic philosophy.
 - D) Mental health clients must rely on clinicians for difficult decision-making and care.
- 253) Which of the following statements best summarizes the medical—psychobiologic position on mental disorders? 253) _____
- A) Mental disorders rarely respond to physical or somatic treatments without careful monitoring of progress by clinicians in medical settings.
 - B) Mental illnesses with an organic cause have an unpredictable course and poor prognosis.
 - C) Factors related to mental disorders can include excesses or deficiencies of brain neurotransmitters as well as alterations in biologic rhythms, including the sleep-wake cycle and genetic predispositions.
 - D) Biological interventions such as hormones, diet, and medications must be changed frequently as they are only effective for short periods of time.
- 254) The nurse and a client are discussing the diagnosis of depression. The client asks, "Where in my brain does the depression come from?" The nurse is aware that: 254) _____
- A) The occipital lobe governs perceptions of events, judging them as positive or negative.
 - B) The limbic system is thought to be the emotional center of the brain.
 - C) The parietal lobe has been linked to depression.
 - D) The medulla regulates key biological and psychological activities.
- 255) The mother of a client diagnosed with schizophrenia is tearful and wonders aloud if she passed the illness on to her child and if her grandchild will also develop the disease. The nurse should reply with which statement? 255) _____
- A) "Schizophrenia does have a strong genetic link, but at present there is no specific genetic test for it."
 - B) "I see you are feeling upset. Do you want to talk?"
 - C) "You and your child should volunteer for genetic research."
 - D) "Your grandchild has nothing to worry about."
- 256) A nurse is teaching a client how selective serotonin reuptake inhibitor medications work. The client states "I am depressed, why I should learn about serotonin is beyond me." The nurse should explain that: 256) _____
- A) Serotonin is associated with alterations in mood.
 - B) Decreased serotonin will increase the client's energy levels.
 - C) Increased serotonin will assist with sleep patterns.
 - D) Serotonin will help the client think more clearly.
- 257) The nurse is learning how to reduce the stigma associated with substance dependence. What knowledge of psychobiology will help reduce the stigma? 257) _____
- A) Alcoholics Anonymous is an accepted treatment approach.
 - B) Relapse is a common feature of substance abuse.
 - C) There is heritability and predisposition to alcohol dependence as well as complex environmental influences.
 - D) Clients with alcohol dependence cannot be held accountable for their actions.

- 258) In reviewing the history of a client on risperidone (Risperdal), the nurse notes that no previous diagnosis is available. The nurse knows that the newer atypical antipsychotic medications are commonly given for which of the following syndromes? 258) _____
- Select all that apply.
- A) Attention deficit disorder
 - B) Antisocial personality disorder
 - C) Dementia with psychotic features
 - D) Bipolar I disorder
 - E) Schizophrenia
- 259) The client tells the nurse that the medications are so expensive and says that there is a website that sells the medications at quite a reduction. What education is warranted by the nurse? 259) _____
- A) The client should try the medications for a while and note if they seem to have the same effect.
 - B) There are no legitimate sources for psychiatric medications on the internet.
 - C) Legitimate internet pharmacies carry accreditation that can be verified.
 - D) Less expensive medications will not work as well as those that cost more.
- 260) A woman calls the nurse at the mental health clinic about her husband who takes phenelzine (Nardil). She states that he took several over-the-counter decongestants and now has a stiff neck, headache, nausea, and vomiting. The nurse bases her response on what information? 260) _____
- A) Agranulocytosis is an adverse reaction that occurs due to the interaction of MAOIs and decongestants.
 - B) Flu-like symptoms are common when clients begin taking MAOIs.
 - C) Neuroleptic malignant syndrome presents with muscular rigidity following the ingestion of MAOIs.
 - D) MAOIs can trigger a hypertensive crisis if taken with sympathomimetics.
- 261) The client with schizophrenia is on olanzapine (Zyprexa) and has gained ten pounds in the four weeks after its initiation. The client asks the nurse if the weight gain is related to this medication. What nursing response is correct? 261) _____
- A) The client is most likely gaining weight due to a hidden alcohol problem.
 - B) The client was evidently not weighed correctly initially.
 - C)
 - D) The client is probably just feeling better and eating more.
- 262) The visiting nurse cares for an older client with rheumatoid arthritis. During a nurse's visit to supervise the home health aide, the client reports a flare-up in symptoms and the pain medication is not helping. To plan continuing care for the client, it would be important to focus on: 262) _____
- A) Environmental conditions, temperature, and humidity.
 - B) Emotional issues and depression.
 - C) Dietary changes.
 - D) Medication tolerance and addiction.

- 263) The client is a homeless veteran who has been staying at a shelter since discharge after serving in Iraq. The client has become increasingly irritable over the last two weeks and might be evicted from the shelter if the client's behavior does not improve. The nurse learns that the client has not had more than a few hours of sleep in the last two days. Which diagnosis would be most appropriate for this client at this time? 263) _____
- A) Alteration in self-concept related to survivor guilt
 - B) Posttraumatic stress disorder related to combat experiences
 - C) Potential for self-harm related to irritability secondary to sleeplessness
 - D) Sleep pattern disturbance related to anticipation of threat to basic needs and security
- 264) A client reporting respiratory discomfort, dizziness, and becoming easily fatigued is given a diagnosis of cardiac neurosis. Which interventions would the nurse expect to be used with this client? 264) _____
- Select all that apply.
- A) Medical or surgical treatment
 - B) Weight control
 - C) Stress management
 - D) Relaxation training
 - E) Biofeedback
- 265) Active treatment for a diagnosed disorder of major depression would occur during which of the following stages of the natural history of disorder? 265) _____
- A) Stage of clinical disorder
 - B) Stage of susceptibility
 - C) Stage of presymptomatic disorder
 - D) Stage of disability
- 266) Serving as a nurse advocate for culturally diverse clients means that the nurse: 266) _____
- A) Helps them make substantive changes in their health behavior.
 - B) Explains western medical concepts so they can better adapt.
 - C) Makes a decision about which beliefs are wrong and need radical adjustments.
 - D) Supports and defends their right to their medical beliefs and values.
- 267) In the aftermath of Hurricane Katrina, many individuals presented with signs and symptoms of post-traumatic stress disorder. This is an example of what type of risk factor? 267) _____
- A) Socioeconomic status
 - B) Gender
 - C) Ethnicity
 - D) Social environment
- 268) During the first interaction with a client, the nurse makes an introduction and identifies the purpose of the interaction. This serves to accomplish which of the following in developing a trusting relationship? 268) _____
- A) Setting goals
 - B) Maintaining
 - C) Building
 - D) Initiating
- 269) Which of the following are included when documenting client education? 269) _____
- Select all that apply.
- A) The client's response
 - B) The assessment of the client
 - C) The purpose for the educational interaction
 - D) The nursing diagnosis
 - E) The educational content discussed with the client

- 270) Which of the following is not related to the theory of successful versus disturbed communication patterns during an admission assessment? 270) _____
- A) The appropriateness of the content of the message.
 - B) How efficiently the client delivers a message.
 - C) The language level of the assessment nurse.
 - D) The quality of the feedback provided.
- 271) A client with bipolar disorder tells the nurse, "I am thinking of switching to a alternating day/night shift because it pays more and will give me more time with my children." The nurse's reply should be based on the knowledge of which of the following? 271) _____
- A) Biologic rhythms do not influence mood disorders.
 - B) The client's priority is steady employment.
 - C) Disruptions in biologic rhythms will impact the client's bipolar disorder.
 - D) The client should contact the nurse if prodromal symptoms of the bipolar disorder occur.
- 272) The client with bipolar disorder, who is on Divalproex, asks the nurse why the psychiatrist ordered an anticonvulsant when the client has no history of seizures. 272) _____
- A) The client must be on another medication that lowers the seizure threshold and the Divalproex is protective.
 - B) Clients with bipolar disorder are at increased risk of having seizures and are treated to prevent them.
 - C) Divalproex is not an anticonvulsant; it is an antipsychotic medication.
 - D) Several anticonvulsant medications, including Divalproex, are used as mood stabilizers.
- 273) At a medication education meeting, a colleague asks the nurse how medications that increase acetylcholine are helpful to people with dementia. What nursing response is correct? 273) _____
- A) Acetylcholine is involved in restoring serotonin and other chemicals that decrease anxiety.
 - B) The cholinergic system is useful in helping to dull clients' awareness of their progressive losses.
 - C) Acetylcholine is helpful in censoring feelings that arise in the midbrain and cause distress.
 - D) The cholinergic system is involved in memory, problem solving, and other cognitive skills.
- 274) A client with diabetes checks blood sugar levels daily and carefully administers insulin, but has not been following a diabetic diet. After discussion with the nurse about the importance of diet, the client states intentions to eat regular meals, get sugar substitute and fresh vegetables, throw out potato chips and cookies, and buy a new nonstick frying pan. The client's behavior is an example of: 274) _____
- A) Reappraisal.
 - B) Secondary appraisal.
 - C) Primary appraisal.
 - D) Coping.
- 275) Knowing that there is a high rate of smoking in the local community, a nurse decides to lead a community health promotion group and seeks the hospital's backing. The nurse decides to organize the curriculum around the Lazarus Model of Stress. How does this model motivate smoking cessation? 275) _____
- A) By helping participants understand the nature of stress as a conflict
 - B) By encouraging the exploration of the pros and cons of smoking
 - C) By helping participants understand stressors in their own lives
 - D) By understanding the negative effects of stress on the body

- 276) A nurse is admitting a client who is from Japan. What is the first step the nurse should take? 276) _____
A) Talk with the client to determine the client's level of fluency.
B) Follow the admission assessment paperwork carefully.
C) Ask all family members to stay with the client during the admission assessment.
D) Call for a Japanese interpreter.
- 277) A client with a history of alcohol dependence is discharged with nutritional recommendations to increase the intake of vitamin B foods and thiamine. The client states, "I can't eat this stuff. This food isn't fit for real people." The nurse recognizes that which factor was not incorporated into the plan of care? 277) _____
A) Marital status
B) Social environment
C) Lifestyle habits
D) Age
- 278) When considering communication skills, the nurse caring for an older client anticipates that the client will: 278) _____
A) Interrupt frequently.
B) Remain silent.
C) Take longer to respond.
D) Answer questions with one-word responses.
- 279) During a group session, a client expresses anger at the nurse. The nurse sits tensely with arms and legs crossed while verbally agreeing that the client's point of view is correct. Which of the following messages is being sent by the nurse? 279) _____
A) The nurse is demonstrating empathy.
B) The nurse is being patient.
C) The nurse is expressing warmth toward the client.
D) The nurse is sending a mixed message.
- 280) The client asks the nurse how the SSRI antidepressant that the client is prescribed works. What nursing response is correct? 280) _____
A) SSRIs allow more of a chemical neurotransmitter, serotonin, to be available to areas of the brain.
B) SSRIs work on depression by sedating the centers of the brain responsible for worrying.
C) SSRIs decrease the amount of norepinephrine available in the lower cortical areas.
D) SSRIs are stimulants that enhance the activity of the brain and pleasure centers.
- 281) A client's progress notes read, "states he does not want to sit or talk with others; they 'frighten' him; stays in room alone unless strongly encouraged to come out; no group involvement; at times listens to group from a distance but does not engage in conversation; some hypervigilance and scanning noted." The nurse decides that the client's behavior is defensive and plans care accordingly. Which strategy should the nurse employ? 281) _____
A) Help the client identify his fears regarding participating in the group.
B) Help the client develop motivation and a plan for group involvement.
C) Help the client see that there is a possibility for change.
D) Help the client gradually accept realistic goals.

282) A nurse is responding to a code on the unit which occurs during the nurse's scheduled lunch time. Racing to the code, the nurse cuts her hand on a sharp doorframe but continues quickly down the hall and begins the code. The fight-flight response to stress has allowed the nurse to do which of the following things? 282) _____

Select all that apply.

- A) Resist germs that were trying to get into the cut.
- B) Notice getting cut in the arm in the rush to respond.
- C) Get to the scene quickly.
- D) Remember what needed to be done.
- E) Do not feel hungry during the code.

283) A 40-year-old client was brought to the emergency room after a motor vehicle accident. The client had been drinking alcohol and the client's blood alcohol level was 0.12 g/dl. The client reports a family history of alcoholism and tells the nurse, "It is hopeless, I am a drunk just like the rest of my family." The nurse knows that the client's risk for alcohol abuse: 283) _____

- A) Can be modified through abstinence and behavior change.
- B) Is low based on the client's alcohol level.
- C) Is high based on the client's age.
- D) Will determine the client's response to treatment.

284) During a group session, the clients are asked to make one positive statement about their home life. The nurse notices that one of the clients begins to fidget in the chair and interprets this behavior as: 284) _____

- A) An expression of discomfort.
- B) A therapeutic use of space.
- C) An excuse to avoid answering the question.
- D) A form of nonlanguage vocalization.

285) A client requests vanilla pudding after a day of diagnostic tests and talking to doctors. The client remembers the client's mother always made vanilla pudding when the client was sick. Which types of coping mechanism is the client describing? 285) _____

Select all that apply.

- A) Talking it out
- B) Privately thinking it through
- C) Engaging in self-healing mind-body practices
- D) Using symbolic substitutes
- E) Seeking comfort

286) A client with a diagnosis of bipolar disorder has been unable to resume a career as a teacher because of the illness. The client receives government assistance and spends days at the local Community Mental Health's Psychosocial Rehabilitation Program. The client's experience is indicative of which of the following stages of the natural history of disorder? 286) _____

- A) Stage of susceptibility
- B) Stage of disability
- C) Stage of presymptomatic disorder
- D) Stage of clinical disorder

- 287) Which of the following interventions are used by the nurse to demonstrate active listening? 287) _____
- Select all that apply.
- A) Nodding one's head in response to client's verbal comments
 - B) Rocking back and forth in the chair
 - C) Using silence
 - D) Leaning in toward the client
 - E) Covering one's mouth when yawning
- 288) A nurse reviews the chart of a client seen at the nursing clinic for treatment of tension headache. Which client complaint did the nurse enter into the nursing record? 288) _____
- A) "Usually there is just this steady pressure around my entire head."
 - B) "I can tell it's coming on; sometimes I vomit before it hits."
 - C) "When the music plays so loud, my head starts to pound."
 - D) "My whole cheek hurts, and it feels like I have bruising under my eye."
- 289) The nurse is taking the history of a psychiatric client who is of Puerto Rican descent. Which assessment question would evaluate for the presence of fatalism? 289) _____
- A) When was your last hospitalization?
 - B) Who accompanied you to the hospital?
 - C) How do you manage your health?
 - D) Are you experiencing problems getting to the doctor?
- 290) A client asks the nurse about the doctor's comment that he may have problems due to "delayed synaptic transmission" in his brain. The nurse explains that the best way to describe a synaptic transmission is which of the following? 290) _____
- A) The space where neurotransmitters match up with receptors
 - B) An electrochemical process called neurotransmission
 - C) Where the axon is released
 - D) When the receptors bind to neurons
- 291) A nurse is caring for a client with a terminal illness. The client asks if the nurse will pray with the client for the remission of the cancer. The nurse does not practice the same religion and does not believe that a remission is possible at this stage of the disease. The nurse should: 291) _____
- A) Gently confront the client about unrealistic expectations that the cancer is going to regress.
 - B) Call the chaplain and set up a referral for the client's spiritual distress.
 - C) Stand silently for a few moments while the client prays.
 - D) Encourage the client to go ahead, but leave the room while the client prays.
- 292) A nurse is asked to consult with the local domestic violence shelter. The shelter workers state that women of Hispanic descent do not use the services offered. One worker states, "You know with all that Hispanic machismo you can bet that those women are probably being abused." The nurse recognizes that: 292) _____
- A) The agency should add a Spanish greeting on the agency's phone message.
 - B) The agency should place flyers in the local schools.
 - C) The agency should advertise their services in the local newspaper.
 - D) The agency needs help to promote culturally competent values, policy, structures, and practices.

- 293) Psychiatric- mental health nursing interventions occur at which of the following levels of communication? 293) _____
A) Intrapersonal B) Public C) International D) Interpersonal
- 294) In trying to understand other cultures, what should the nurse know about how cultural values can influence health beliefs? 294) _____
A) Cultural values will not matter if the nurse is from the dominant culture.
B) Cultural values will not shape perceptions of health, disease, prevention, and treatment.
C) Cultural values and other differences will negatively influence outcomes.
D) Cultural values may shape perceptions of health, disease, prevention, and treatment.
- 295) The nurse is admitting a client from the emergency room. Which of the following would be used to clarify the nurse's understanding of the client's chief complaint? 295) _____
A) "Don't worry; we have the technology to take care of you."
B) "I feel your pain when I see you hold your side."
C) "Are you saying you feel that you are bleeding inside?"
D) "If you are bleeding, where is the blood?"
- 296) When assessing a client from a culture different from that of the nurse, which of the following is an effective approach to meet the goal of cultural sensitivity? 296) _____
A) Determine what aspects of the client's life should be preserved as they are.
B) Ask the client how he or she is alienated from his or her primary cultural group.
C) Teach the client how to assimilate into the dominant culture.
D) Explain to the client that values must be adjusted to reach a healthy state.
- 297) The nurse is working with a teen admitted with a diagnosis of depression. Which of the following interventions demonstrates that the nurse is sensitive to the client's needs? 297) _____
A) Asking for details to demonstrate interest in the client
B) Using closed-ended questions
C) Listening to the client's feelings
D) Avoiding the use of silence to decrease anxiety
- 298) The nurse gathering data from a client admitted to labor and delivery is overheard making the comment, "You are lying. You need to tell me the truth so we can do what is best for your baby." The nurse's communication is: 298) _____
A) Nontherapeutic. B) A perception check.
C) Necessary. D) Therapeutic.
- 299) While reviewing therapeutic communication techniques, a nursing student made a list of "things not to do or say to a client." Which of the following comments should be on the student's list? 299) _____
A) "What are your concerns about your living situation?"
B) "Why do you think you will never get well?"
C) "What happened when you quit taking your medications?"
D) "How do you feel about being discharged today?"
- 300) A delusional client walks up to the nurse and says, "I am the appointed overseer. Who are you and why are you here?" The most therapeutic response is which of the following? 300) _____
A) "You know who I am."
B) "You are not the overseer; you are a client in the hospital."
C) "You don't know who I am?"
D) "I am your nurse and I will be here to help you until suppertime."

Answer Key

Testname: 2ND TB

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

Answer Key

Testname: 2ND TB

- 51) A, B, C, D, E
- 52) B
- 53) A, B, D
- 54) C
- 55) A
- 56) C
- 57) C
- 58) B
- 59) C
- 60) C
- 61) C
- 62) A
- 63) C
- 64) A
- 65) B
- 66) B
- 67) B
- 68) D
- 69) B
- 70) D
- 71) A
- 72) D
- 73) C
- 74) D
- 75) A
- 76) D
- 77) A
- 78) C
- 79) C
- 80) B
- 81) B
- 82) A
- 83) A
- 84) C
- 85) D
- 86) D
- 87) B
- 88) A
- 89) B
- 90) C
- 91) B
- 92) C
- 93) D
- 94) B
- 95) A, B, E
- 96) B
- 97) B
- 98) A
- 99) B
- 100) A, C, E

Answer Key

Testname: 2ND TB

- 101) B
- 102) D
- 103) D
- 104) C
- 105) C
- 106) A
- 107) C
- 108) B
- 109) A
- 110) B
- 111) A
- 112) C
- 113) D
- 114) B
- 115) D
- 116) A
- 117) A
- 118) B
- 119) D
- 120) A
- 121) C
- 122) B
- 123) C
- 124) B
- 125) B
- 126) A
- 127) C
- 128) B
- 129) C
- 130) B
- 131) D
- 132) A
- 133) C
- 134) B
- 135) A
- 136) C
- 137) A
- 138) C
- 139) B
- 140) A
- 141) B
- 142) A
- 143) D
- 144) C
- 145) A, C, E
- 146) A, C, D
- 147) D
- 148) C
- 149) C
- 150) B

Answer Key

Testname: 2ND TB

- 151) D
- 152) A, C, E
- 153) B
- 154) B
- 155) D
- 156) B
- 157) A
- 158) C
- 159) B
- 160) B
- 161) C, E
- 162) C
- 163) A, B, D, E
- 164) A, B, D, E
- 165) A
- 166) C
- 167) D
- 168) C
- 169) C
- 170) B
- 171) C
- 172) D
- 173) D
- 174) B
- 175) B
- 176) B
- 177) B
- 178) D
- 179) D
- 180) A
- 181) A
- 182) B
- 183) B
- 184) C
- 185) A
- 186) C
- 187) A
- 188) D
- 189) A
- 190) D
- 191) B
- 192) A
- 193) D
- 194) B
- 195) D
- 196) C
- 197) C
- 198) D
- 199) A
- 200) D

Answer Key

Testname: 2ND TB

- 201) B
- 202) B
- 203) C
- 204) A
- 205) B
- 206) C
- 207) B
- 208) B
- 209) B
- 210) A
- 211) A
- 212) A
- 213) B
- 214) B
- 215) C
- 216) A
- 217) B
- 218) A
- 219) D
- 220) D
- 221) C
- 222) D
- 223) A
- 224) D
- 225) B
- 226) A
- 227) B
- 228) C
- 229) A
- 230) D
- 231) B
- 232) A
- 233) D
- 234) D
- 235) C
- 236) B
- 237) D
- 238) C
- 239) A, D
- 240) D
- 241) D
- 242) A
- 243) A
- 244) C
- 245) C
- 246) A
- 247) D
- 248) A
- 249) A
- 250) A

Answer Key

Testname: 2ND TB

- 251) B
- 252) B
- 253) C
- 254) B
- 255) A
- 256) D
- 257) C
- 258) C, D, E
- 259) C
- 260) D
- 261) C
- 262) B
- 263) D
- 264) A, B, C, D, E
- 265) A
- 266) D
- 267) D
- 268) D
- 269) A, C, E
- 270) C
- 271) C
- 272) D
- 273) D
- 274) A
- 275) B
- 276) A
- 277) C
- 278) C
- 279) D
- 280) A
- 281) A
- 282) A, C, D, E
- 283) A
- 284) A
- 285) B, D, E
- 286) B
- 287) A, D
- 288) A
- 289) C
- 290) B
- 291) C
- 292) D
- 293) D
- 294) D
- 295) C
- 296) A
- 297) C
- 298) A
- 299) B
- 300) D