

Test Bank to Accompany

PSYCHIATRIC-MENTAL
HEALTH NURSING
An Interpersonal Approach

Second Edition

Jeffrey S. Jones
Joyce J. Fitzpatrick
Vickie L. Rogers

Editors

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The Instructor's Manual is designed to assist your instructional efforts in the classroom. Listed are key terms from each chapter as well as expected learning outcomes. The hyperlinks for each chapter are designed to allow the student to view film(s) that augment the main themes of the topic. Various films and/or additional hyperlinks have been recommended for use by the instructor that also allows further exposure to the chapter content. Questions and answers from the case studies presented in Chapters 11 to 19 are also provided to enhance critical thinking skills for students.

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CHAPTER 1

Mental Health Trends and the Historical Role of the Psychiatric-Mental Health Nurse

1. A nurse is giving a presentation about the historical development of modern mental health care. Which of the following should be emphasized as a consequence of 18th- and 19th-century reforms?
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 - C. Sigmund Freud developed psychoanalytic theory
 - D. Mental illness became viewed as a result of demonic possession

Answer: B

2. Following is a list of significant events in the evolution of mental health care. Place the events in the order in which they occurred.
- A. Establishment of the National Institute of Mental Health
 - B. Development of medications that address neurotransmitter uptake
 - C. Publication of Surgeon General's Report on Mental Health
 - D. Deinstitutionalization of the mentally ill

Answer: A, D, B, C

3. Match the following individuals with their accomplishments.

<u>3.1 Florence Nightingale</u>	<u>A. Wrote the first psychiatric-mental health nursing textbook</u>
<u>3.2 Harriet Bailey</u>	<u>B. Advocated for patient self-care and independence</u>
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<u>3.4 Linda Richards</u>	<u>D. Established first nursing program for psychiatric-mental health nurses</u>

Answer: 3.1–B; 3.2–A; 3.3–D; 3.4–C

4. In accepting a job on an inpatient unit, a nurse learns that the work environment emphasizes milieu management to facilitate treatment. Which of the following can the nurse expect?
- A. Nurses will be responsible for adjusting light and noise levels to create a less stressful environment
 - B. Nurses will facilitate therapeutic group meetings
 - C. Nurses will work within a self-managed team framework
 - D. Nurses will devote most of their time to working one-on-one with patients

Answer: A

5. Which of the following are contemporary settings in which a psychiatric-mental health nurse might expect to work?
- A. Residential facilities
 - B. Disaster response teams
 - C. Schools
 - D. All of the aforementioned

Answer: D

6. When it is said that the psychiatric-mental health care nurse adopts a “holistic” view of the patient, what is the best interpretation of this perspective?
- A. The nurse considers the patient’s mental and emotional state primary and physical health secondary
 - B. The nurse has a master’s degree and advanced certification
 - C. The nurse takes into account the needs of the patient within the context of the patient’s family and community
 - D. The nurse does not participate in administering medications to patients but is constrained to nonpharmacological treatments

Answer: C

7. A psychiatric-mental health clinical nurse specialist (CNS) or nurse practitioner (NP) might engage in which of the following activities (select all that apply)?
- A. Prescribing psychopharmacological medication
 - B. Individual psychotherapy
 - C. Diagnostic screening
 - D. Research
 - E. Program development

Answers: A, B, D

8. A nurse is preparing a presentation on health care careers for a group of prospective nursing students. The presentation should state that a nurse with a bachelor’s degree can perform all of the following tasks EXCEPT:
- A. Patient intake screening
 - B. Psychotherapy
 - C. Administration of medication
 - D. Milieu management

Answer: B

9. The first nurse to strongly emphasize the importance of meeting both the client’s physical needs as well as emotional needs was?
- A. Linda Richards
 - B. Luella Parsons
 - C. Martha Rogers
 - D. Joycelyn Elders

Answer: A

10. As a result of nurse theorists such as Peplau and Travelbee, _____ was now considered an important part of the patient’s recovery.
- A. Medication
 - B. Therapeutic communication
 - C. Physical therapy
 - D. Activities therapy

Answer: B

11. Milieu management has to do with?
- A. Discharge planning
 - B. The doctor–nurse relationship
 - C. Awareness of the setting/environment
 - D. Efficient ways of charting

Answer: C

12. When practicing basic level of psychiatric-mental health nursing, the American Nurses Credential Center (ANCC) recognizes the preferred level of preparation as the:
- A. Associate degree
 - B. Diploma degree
 - C. Master’s degree
 - D. Bachelor’s degree

Answer: D

13. The first advanced psychiatric nursing role was that of the:
- A. Clinical nurse specialist
 - B. Certified nurse practitioner
 - C. Clinical nurse leader
 - D. Certified nurse midwife

Answer: A

14. During the 1990s there was a major shift in psychiatric-mental health treatment in that:
- A. Patients now had complete control over their care
 - B. Medication became the first line of treatment and therapy became secondary
 - C. Nurses now conducted most of the therapy groups on psychiatric units
 - D. Psychiatric inpatient stays lengthened to accommodate insurance requirements

Answer: B

15. Any nurse practicing psychiatric-mental health nursing will be held specifically accountable to:
- A. National League for Nursing Guidelines for Practice
 - B. Scope and Standards of Practice for Psychiatric Nurse Practitioners
 - C. ANA’s Psychiatric-Mental Health Nursing: Scope and Standards of Practice
 - D. American Psychiatric Association Code of Ethics

Answer: C

16. Which goal is part of the Federal Government’s *Healthy People 2020* initiative?
- A. Reduce the suicide rate
 - B. Reduce the proportion of persons who experience major depressive episodes
 - C. Increase the proportion of homeless adults with mental health problems who receive mental health services
 - D. All of the aforementioned

Answer: D

CHAPTER 2

Interpersonal Relationships: The Cornerstone of Psychiatric Nursing

1. A nursing student would demonstrate understanding of the interpersonal relationship (IPR) as the cornerstone of nursing when the student cites which of the following as key components of the IPR (select all that apply)?
- A. Intelligence
 - B. Understanding of oneself
 - C. Ability to speak persuasively
 - D. Putting other people's feelings first
 - E. Verbal and nonverbal communication

Answers: B, E

2. Match the following activities to the phase of Peplau's interpersonal process in which they most appropriately occur.

<u>2.1. The nurse and patient understand the patient's health care needs and the role the nurse will fulfill in meeting those needs.</u>	<u>A. Identification</u>
<u>2.2. The nurse explains the likely time frame of the therapeutic relationship while maintaining focus on the patient.</u>	<u>B. Exploitation</u>
<u>2.3. The nurse evaluates the patient's readiness to end the therapeutic relationship, taking care not to end the relationship prematurely.</u>	<u>C. Orientation</u>
<u>2.4. The patient progresses from being relatively dependent on the nurse to independence.</u>	<u>D. Resolution</u>

Answer: 2.1–A; 2.2–C; 2.3–D; 2.4–B

3. With which one of the following statements is a nurse showing an awareness of self-conducive to establishing a therapeutic relationship with a patient?
- A. "I come from a cultural background and have had previous experiences that influence my perception and expectations of the therapeutic relationship."
 - B. "I have the appropriate credentials to perform my role and am very knowledgeable about this patient's diagnosis."
 - C. "I can convey a strong sense of my personality and values to the patient so that the patient knows what to expect from me."
 - D. "I am able to set aside and even eliminate all my biases so that they do not affect the care I give patients."

Answer: A

4. A nurse is treating a patient with bipolar disorder. Put the following activities in the order in which they would most appropriately occur, according to Peplau's original model of the interpersonal process.
- A. The nurse validates the patient's understanding of her medication schedule and the supportive resources available in the community.
 - B. The nurse presents himself as a capable health care professional whom the patient can trust.
 - C. The patient and nurse discuss how the patient can best manage the side effects of prescribed medication and how the patient can recognize the onset of a depressive or manic episode and get assistance if needed.
 - D. The patient describes her recent actions, which include emptying her bank account and engaging in high-risk sexual behavior, and her current state of mind, which she says is "dark" and "hopeless."

Answer: B, D, C, A

5. A patient admitted with a diagnosis of acute depression asks the nurse, "Am I always going to feel this way?" The nurse considers how much information to give the patient about the medication that has been prescribed and the range of possible outcomes of the treatment. The nurse is in which of the following roles, according to Peplau?
- A. Counselor
 - B. Teacher
 - C. Resource person
 - D. Leader

Answer: C

6. A patient describes having lost his job several months ago and feeling very worried about money as well as ashamed about being unemployed. His girlfriend also recently broke up with him due to his financial problems. The patient has been sending out resumes and plans to attend a professional conference next week, but is so nervous about going he feels panicked. Which level on Travelbee's continuum of suffering most closely describes this patient?
- A. Transitory feeling of displeasure
 - B. Extreme anguish
 - C. Malignant phase of despairful not caring
 - D. Terminal phase of apathetic indifference

Answer: B

7. Travelbee's model of the nurse-patient relationship has been most readily applied to which of the following (select all that apply)?
- A. Patients with personality disorders
 - B. Patients with schizoaffective disorders
 - C. Patients with depressive disorders
 - D. Patients in institutional settings
 - E. Patients who are terminally ill

Answers: C, E

8. Before meeting with a patient who has arrived for her initial appointment at the clinic, a nurse reviews the patient's intake form. The nurse is in which stage of Travelbee's model?
- A. Empathy
 - B. Original encounter
 - C. Sympathy
 - D. Orientation

Answer: B

9. _____ is considered the founder of modern psychiatric-mental health nursing.

- A. Peplau
- B. Travelbee
- C. Nightingale
- D. Mahoney

Answer: A

10. Peplau's 1952 book *Interpersonal Relationships in Nursing: A Conceptual Frame of Reference for Psychodynamic Nursing* was considered unique because:

- A. She used her own money to get it published
- B. It was one the first books to be written by a nurse without a physician co-author
- C. She invited Sigmund Freud to write the introduction
- D. It became required reading in medical schools

Answer: B

11. Peplau's *original* theory of interpersonal relations between the nurse and the patient describes _____ phases.

- A. 3
- B. 2
- C. 4
- D. 6

Answer: C

12. Peplau described roles a nurse may find himself or herself in when working with a patient. "Clients seeing those who care for them as they would others who have cared for them in their lives, i.e., mother, father, sister, wife, etc." would best identify which role?

- A. Leader
- B. Teacher
- C. Counselor
- D. Surrogate

Answer: D

13. Joyce Travelbee developed her *human-to-human relationship* theory because:

- A. She felt she witnessed a lack of compassion on the part of her nursing colleagues and that the time was right for professional nursing to undergo a "humanistic revolution."
- B. She was influenced by another nurse theorist, Ide Jean Orlando, who emphasized the need for nurses to view the patient as a whole, not just a disease entity.
- C. She admired the work of Victor Frankl, who felt that all life, even the most desperate of situations, had meaning and it was these situations that gave a person a reason to live.
- D. All of the aforementioned

Answer: D

14. Travelbee's theory has three main concepts. They are:

- A. Aggression, death, survival
- B. Resilience, attachment, forgiveness
- C. Human being, suffering, and hope
- D. Idealization, transference, counter-transference

Answer: C

15. Travelbee felt that if a person's suffering is left to go on for too long that it may result in:

- A. Release and spiritual rebirth
- B. Terminal phase of apathetic indifference
- C. Break from reality and psychosis
- D. Reengagement with the family system

Answer: B

16. According to Travelbee, only when a nurse has experienced the original encounter, emerging identities, empathy, and sympathy for the patient can they then truly develop _____.

- A. Rapport
- B. Subjectivity
- C. Extreme anguish
- D. Love

Answer: A

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- | C. Break from reality and psychosis
- | D. Reengagement with the family system

| ~~Answer: B~~

| —16. According to Travelbee, only when a nurse has experienced the original encounter, emerging identities, empathy, and sympathy for the patient can they then truly develop _____.

- | A. Rapport
- | B. Subjectivity
- | C. Extreme anguish
- | D. Love

| ~~Answer: A~~

Chapter 3

The Value of the Use of Dialogue and Self in Recovery

—1. Which of the following indicates a nurse is accurately reflecting an awareness of self that is congruent with psychiatric-mental health nursing?

A. “I am an adult and a trained professional. My childhood experiences are not relevant to my interactions with patients.”

B. “My self is continually evolving as a result of personal reflection and interaction with others, including patients.”

C. “In the professional health care environment, myself is represented by my name, my job title, and the decisions and actions I take with respect to patients.”

D. “When I am at work, my attention needs to be on my patients, not on self-reflection.”

~~Answer: B~~

—2. In describing 21st-century changes in the mental health care paradigm to a group of nursing students, a teacher would emphasize which of the following?

A. The addition of the concept of recovery

B. A renewed focus on the expertise of care providers

C. A focus on providing medical interventions rather than lifestyle interventions

D. Careful attention to metrics to ensure that progress suffers no setbacks

Answer: A

—3. Which of the following are activities that promote the therapeutic use of self (select all that apply)?

A. Engaging in reflection with other nurses about the work of nursing

B. Integrating theory with experience and knowledge of self to structure interventions for patients

C. Monitoring and acknowledging one’s reactions to the patient and exploring the experiences and values that inform those reactions

D. Compartmentalizing one’s reactions to the patient so that they do not interfere with patient care

E. Finding common ground with the patient so that pleasant social interaction can ensue, helping the patient feel more comfortable

Answers: A, B, C

—4. Which of the following scenarios shows a nurse in the choosing stage of values clarification?

A. A nurse realizes, upon self-reflection, that she was raised to value hard work and has difficulty sympathizing with patients who do not seem to want to work hard at getting better.

B. A nurse who is working on her development with her supervisor states that she wants to develop more empathy for the experience of those patients who do not feel motivated to follow a therapeutic plan.

C. A nurse helps a patient explore the probable consequences for his life and the lives of his children if he does not keep his therapy appointments.

D. A nurse extends her time with a patient beyond what was planned to explore why the patient repeatedly fails to keep appointments with health care and social services providers.

~~Answer: B~~

—5. A nurse should be concerned about the quality of his therapeutic relationships with patients when he finds himself thinking which of the following?

A. “I am not sure I have the skill to help this patient. I should discuss this patient’s care with my supervisor.”

B. “Caring for this patient is exhausting because of the patient’s cognitive deficits and the need to share information in a way the patient will understand.”

C. “This patient does not trust authority figures and views me as an authority figure, so meaningful communication will require more time and work than usual.”

D. “We are often short-staffed, and all my supervisor cares about is whether the patients are compliant with their medication. Therefore, I can’t be expected to spend time talking to patients.”

Answer: D

—6. Social chitchat is an essential element of authentic communication, allowing a therapeutic relationship to form.

Answer: False

—7. A patient shares that she has been raped and has suffered debilitating panic attacks since the assault. The nurse, who has never had a similar experience, should

A. Focus the therapeutic session on other issues

B. Work with the health care team to assign a different nurse to this patient

C. Work with the patient on the basis of theoretical models of recovery

D. Listen empathetically and convey a desire to engage with the patient

Answer: D

—8. A nurse is not using a valid therapeutic communication technique when she does which of the following?

A. Mirrors the patient’s posture and position and allows an extended silence to occur.

B. Asks the patient, “Do you feel better since starting to take your medication a week ago?”

C. Says to the patient, “It sounds as though you feel angry at your partner.”

D. Shares a personal experience so that the patient will feel more comfortable talking about his own experience.

Answer: B

—9. When a nurse is seeking to engage in therapeutic communication with a patient, which of the following could constitute barriers to effective interaction? (select all that apply)

A. The sound of other people talking in the hallway outside the room, even though the door is closed

B. A tendency of either the patient or the nurse to avoid extremely painful topics

C. The nurse says, “Sounds like six of one, half a dozen of the other. You might as well stay with him if you’re not sure leaving will be any better.”

D. The nurse asks, “Why do you feel you are not getting the kind of treatment you need?”

E. The nurse says, “I understand that you’re worried about the CIA and NSA and would like to talk about them. But we need to get through this checklist first.”

Answers: A, B, C, E

—10. A group of nursing students in a psychiatric mental health rotation are reviewing information about various theorists associated with self, therapeutic use of self, and the therapeutic relationship. The students demonstrate understanding of the material when they identify which theorist as having identified three core conditions for a therapeutic relationship?

A. Hildegard Peplau

B. Phil Barker

C. Carl Rogers

Answer: C

—11. A psychiatric-mental health nurse is engaged in a therapeutic dialogue with a patient. The patient states, “I’ve been feeling so down lately.” Which of the following would the nurse identify as being congruent with the patient’s statement?

- A. Wide facial grin
- B. Low tone of voice
- C. Fidgeting
- D. Erect posture

Answer: B

—12. When engaging in therapeutic communication for the initial encounter with the patient, which of the following would be most appropriate for the nurse to use?

- A. Silence
- B. “What would you like to discuss?”
- C. “Are you having any problems with anxiety?”
- D. “Why do you think you came here today?”

Answer: B

—13. A patient states, “I get so anxious sometimes. I just don’t know what to do.” The nurse responds by saying, “You should try to do some exercise when you start to feel this way. I know it helps me when I get anxious.” The nurse is using which of the following?

- A. Clarifying
- B. False reassurance
- C. Validating
- D. Giving advice

Answer: D

—14. In carrying out eCPR (questions 14–16), connecting is best carried out by:

- A. Communicating mainly on verbal level
- B. Communicating with eyes, ears, and heart
- C. Being emotionally reserved
- D. Sharing one’s personal background

Answer: B

—15. Empowering is best nourished by

- A. Suggesting solutions
- B. Collaborating and sharing power
- C. Judging the person in distress
- D. Encouraging the person to verbalize

Answer: B

—16. Revitalization emerges from

- A. Planning a person’s future for them
- B. Creating mutual dialogue

~~C. Reviewing past problems~~

~~D. Being fully in the present moment with the person~~

~~Answer: B~~

Chapter 4

Boundary Management

—1. Match the nurse's action with the type of boundaries it exemplifies.

1.1. The nurse vents to a colleague that she really hates the ex-spouse of a patient for hurting that patient.	A. Physical boundaries
1.2. When a patient resists moving on to another topic and wants to continue to talk about something the nurse feels they have already thoroughly explored, the nurse allows the patient to do so while prompting her to answer different questions about the issue.	B. Enmeshed boundaries
1.3. A patient deflects questions about why she has dropped out of college several times, and the nurse responds by saying, "We cannot continue to work together unless you give me a straight answer to my question."	C. Flexible boundaries
1.4. The nurse considers whether touching a particular patient is appropriate for the relationship.	D. Rigid boundaries

Answer: 1.1-B; 1.2-C; 1.3-D; 1.4-A

—2. Which of the following constitutes a breach of professional boundaries by a nurse (select all that apply)?

- A. Not allowing the patient privacy to attend to bodily functions when the patient cannot safely do so by herself
- B. Becoming romantically involved with a patient's ex-partner after learning that she no longer sees him socially
- C. Sharing pictures of one's pets with an animal-loving patient to establish rapport
- D. Borrowing \$20 from a patient's wallet because he won't be needing it while he is committed
- E. Encouraging a patient who is looking for spiritual direction to attend one's own church

Answers: B, D, E

—3. Match the following boundary-setting opportunities with the corresponding phrases of Peplau's nurse-patient relationship model.

3.1. The nurse focuses conversation on the therapeutic goals the patient has achieved.	A. Orientation phase
3.2. The nurse uses reflection and self-awareness to identify transference or counter-transference if the nurse reminds the patient of someone she has felt close to.	B. Identification phase
3.3. Moments of insight may lead to feelings of interpersonal intimacy, endangering professional boundaries.	C. Exploitation phase
3.4. The nurse and the patient discuss and mutually agree on the goals for treatment.	D. Resolution phase

~~Answer: 3.1–D; 3.2–B; 3.3–C; 3.4–A~~

~~–4. Which of the following is an example of counter-transference?~~

~~A. A 15-year-old girl being treated for an eating disorder feels that the nurse reminds her of her mother, and the girl responds by being reluctant to discuss her feelings with the nurse.~~

~~B. A young man struggling with issues of gender identity would prefer to work with a male nurse.~~

~~C. A nurse realizes that transference is occurring in a relationship with a patient and takes steps to establish appropriate professional boundaries.~~

~~D. A 50-year-old man seeking help for depression after his wife left him identifies the nurse with his ex-wife, and the nurse responds to his unspoken anger by avoiding him.~~

~~Answer: D~~

~~–5. A patient may attempt to violate the boundaries of the nurse–patient relationship. Which of the following is an example of this?~~

~~A. The patient sends the nurse a “Friend” request on Facebook.~~

~~B. The patient shares a narrative of having been sexually abused as a child.~~

~~C. The patient discusses his concerns about his children, of whom he does not have custody.~~

~~D. The patient reveals that he sometimes considers suicide and has thought through a plan for carrying it out.~~

~~Answer: A~~

~~–6. Institutional guidelines that support appropriate nurse–patient boundaries would appropriately include which of the following (select all that apply)?~~

~~A. Nurses should wear clothing that is unlikely to be construed as sexually suggestive.~~

~~B. Nurses should give patients small gifts on the patients’ birthdays and other holidays.~~

~~C. If the patient uses profanity, the nurse should respond in kind to speak the same language as the patient.~~

~~D. Nurses should meet with patients only at the clinic or another designated therapeutic environment.~~

~~E. Nurses should cautiously engage in self-disclosure after self-reflection that it is only for the intentional purpose of furthering the therapeutic relationship for the patient’s benefit.~~

~~Answers: A, D, E~~

~~–7. Which of the following constitutes a clear nurse–patient boundary violation on the part of the nurse?~~

~~A. The nurse probes for further information about the circumstances that led to the end of the patient’s most recent romantic relationship.~~

~~B. The nurse uses critical thinking skills to achieve insight into the patient’s pattern.~~

~~C. To empower the patient in the relationship, the nurse solicits advice about how to handle a romantic relationship.~~

~~D. After the patient shares that her beloved cat has died and tears come to her eyes, the nurse pats the patient’s hand.~~

~~Answer: C~~

~~–8. A nurse feels that she is especially helpful to one particular patient and that they have established a special rapport. Which of the following is present in this relationship?~~

~~A. A nurse–patient boundary crossing~~

~~B. A nurse–patient boundary violation~~

~~C. A warning sign that the nurse–patient boundary requires attention~~

~~D. A probable violation of ethical guidelines~~

Answer: C

—9. Which of the following is the paramount question to ask to evaluate nurse–patient boundaries?

- A. Is the nurse helping this patient achieve therapeutic goals?
- B. Does the patient seem happier because this nurse joined his care team?
- C. Has any behavior taken place that violates state standards?
- D. Whose needs are being met, the nurse’s or the patient’s?

Answer: D

—10. BOUNDARIES, which is the space between the nurse’s power and the patient’s vulnerability is defined as such by:

- A. National Council of State Boards of Nursing
- B. American Psychiatric Nurses Association
- C. American Medical Association
- D. National League for Nursing

Answer: A

—11. TRANSFERENCE is a psychodynamic term used to describe:

- A. The physical movement on the unit within the Milieu
- B. The patient’s emotional response to the health care provider
- C. The nurses emotional response to the client
- D. The emotions felt when charting on a client

Answer: B

—12. Counter-transference occurs when:

- A. The staff-to-patient ratio is too low
- B. The patient has an emotional response to the nurse
- C. The nurse develops a positive or negative emotional response to the patient
- D. Nurses are transferred too often from unit to unit

Answer: C

—13. A BOUNDARY CROSSING refers to:

- A. Confusion between the needs of the nurse and those of the patient
- B. Dating a patient
- C. Refusing to follow a prescriber’s orders for personal/ethical beliefs
- D. A transient, brief excursion across a professional boundary

Answer: D

—14. A boundary violation results:

- A. When there is confusion between the needs of the nurse and those of the patient
- B. There is a brief transient excursion across a professional boundary
- C. When a nurse decides to set limits on clients testing behavior
- D. In assisting the patient understand therapeutic relationships

| Answer: A

| —15. Excessive use of *self-disclosure* with patients puts the nurse at risk for

| A. Boundary crossing

| B. Boundary violation

| C. Burnout

| D. Over involvement with peers

| Answer: B

| —16. Failure to maintain professional boundaries can *most seriously* result in a

| A. Lack of job promotion

| B. Poor job evaluations

| C. Disciplinable offense by a state board of nursing or regulating body

| D. Poor patient satisfaction surveys

| Answer: C17. Boundaries can be classified as

| A. Rigid

| B. Flexible

| C. Enmeshed

| D. All of the aforementioned

| Answer: D

Chapter 5

Critical Thinking, Clinical Decision-Making, and the Interpersonal Relationship

—1. A nurse is giving a presentation on the role of critical thinking in nursing practice. Which of the following words are appropriate to describe it?

A. Judgmental

B. Reflective

C. Creative

D. Analytical

E. Close-minded

Answers: B, C, D

—2. Critical thinking skills can be improved with practice and through experience.

Answer: True

—3. Which of the following is an example of a nurse using critical thinking?

A. Calculating a dosage

B. Following a clinic's standard intake procedure

C. Ensuring that a translator is present during a meeting with a patient who is not proficient in English

D. Explaining the importance of taking prescribed medications without assuming a recent immigrant from a war-torn country has had much experience with prescriptions

Answer: D

—4. Match Peplau's phases of the therapeutic interpersonal relationship to the stages of the nursing process.

4.1. Orientation/identification	A. Planning and implementing interventions
4.2. Exploitation	B. Evaluation
4.3. Resolution	C. Assessment

Answer: 4.1–C; 4.2–A; 4.3–B

—5. What is one way in which critical thinking is used during the assessment stage of the nursing process?

A. To collect data about the patient

B. To work with the patient to identify the problem requiring therapeutic intervention

C. To take an initial therapeutic strategy based on an initial impression of the patient

D. To engage a patient in argument about a proposed course of treatment

Answer: B

—6. During the implementation stage of the nursing process, patients may experience which of the following emotions?

- A. Hope only; if the patient experiences anxiety, the process retreats to the planning stage
- B. Anxiety only; the change involved with implementation makes patients uneasy
- C. Both hope and anxiety; the patient sees the prospect of improvement while feeling apprehensive about making significant changes
- D. Shame and guilt; it is necessary for these emotions to predominate to motivate the patient to change

Answer: C

—7. Which of the following illustrates an effective use of critical thinking to conduct a psychoeducational intervention?

- A. Handing the patient the drug package insert that accompanies the patient's prescribed medication
- B. Assigning a patient who is extremely withdrawn and shy to a boisterous therapy group
- C. Referring an elderly patient who uses the computer only to email her grandchildren to a website with information on aging and depression
- D. Engaging a young professional in a discussion about the interplay of alcohol abuse and depression

Answer: D

—8. The evaluation stage of the nursing process provides the nurse with an opportunity to do which of the following?

- A. Reflect on how well the patient's needs were met
- B. Convey hope that the patient's needs can be identified and addressed
- C. Adjust the timing of interventions to correspond with the patient's needs
- D. Collect data on the patient's physical, social, and psychological status

Answer: A

—9. Which dimension of critical thinking is unique to psychiatric nursing?

- A. It is a conscious, organized activity
- B. It has four specific domains
- C. The interpersonal relationship as a major healing factor
- D. Use of self-examination and self-correction

Answer: C

—10. A common emotion both psychiatric nurses and their patients may experience during the assessment phase of the nursing process is?

- A. Anger
- B. Ambivalence
- C. Anxiety
- D. Sadness

Answer: C

—11. When the psychiatric nurse plans and implements interventions during the exploitation phase of the interpersonal relationship, a critical skill is?

- A. Reflective listening

~~B. A hopeful attitude~~

~~C. Using disease-specific hand-outs~~

~~D. Timing and pacing interventions~~

Answer: D

—
—12. When a psychiatric nurse is concerned that her own feelings or life experiences might be impacting the interpersonal relationship with a patient, she should?

- A. Seek individual clinical supervision
- B. Wait and monitor her feelings to see if the problem resolves by itself
- C. Ask the patient if he or she senses this problem
- D. Recognize that perhaps psychiatric nursing is not the field for her

Answer: A

—13. Which of the following is not a disposition associated with critical thinking?

- A. Honesty about your own biases and stereotypes
- B. Creativity
- C. Asking others for their views before sharing your views
- D. Flexibility in considering a range of alternatives or options

Answer: C

—14. What are the most therapeutic approaches a psychiatric nurse can use in the assessment/identification phase of the interpersonal relationship to assist a patient needing to return to psychiatric care?

- A. Convey a hopeful attitude that help is always available
- B. Discuss the patient's problematic issues in detail to assess what went wrong
- C. Be aware of your own feelings of frustration or failure with the patient
- D. Avoid discussing patient's feelings of shame or anger

Answers: A, C

—15. Which behaviors might a patient commonly display in the evaluation/termination phase of the interpersonal relationship?

- A. Redevelop needs expressed in earlier phases of the relationship
- B. Avoid meeting with the psychiatric nurse
- C. Tell others the psychiatric nurse did a poor job
- D. Demand to be assigned to a new psychiatric nurse

Answers: A, B

Chapter-6

Crisis and Crisis Intervention

—1. Place the stages of Selye's general adaptation syndrome in the order in which they occur:

~~A. Resistance and recovery~~

~~B. Alarm~~

~~C. Exhaustion~~

Answer: B, A, C

—2. Which of the following is not an example of a patient experiencing a crisis?

~~A. A retail store clerk is at work when a man draws a gun and demands the contents of the cash register~~

~~B. A senior in college has several final exams and a final class paper due this week as well as the oral exam for his senior thesis, which he has been writing all year~~

~~C. A family's home burns down, and few of their belongings could be saved~~

~~D. Siblings are removed from their mother's care due to neglect and placed in different foster homes~~

Answer: B

—3. Match the outcome of a crisis situation to the balancing factor at work.

3.1. An individual who has lost his job feels isolated and that no one is available to help.	A. Perception of event
3.2. A parent whose child is persistently struggling in school keeps the child's academic challenges in perspective and accesses appropriate resources.	B. Availability of situational supports
3.3. A middle-aged couple learns that a parent has Alzheimer's disease, and they have no prior experience with this illness.	C. Availability of adequate coping skills

Answer: 3.1 B; 3.2 A; 3.3 C

—4. A teenager who has been thrown out of his parents' home has exhausted the hospitality of his friends and has turned to hustling to make money is in which of Caplan's phases of crisis?

~~A. Phase-1~~

~~B. Phase-2~~

~~C. Phase-3~~

~~D. Phase-4~~

Answer: C

~~—5. Match each description of a crisis to the category it represents.~~

5.1. A town is flattened by a strong earthquake, leaving thousands of people homeless and without basic supplies.	A. Maturation crisis
5.2. A long-married couple retire from their employment within months of each other and find themselves in conflict now that they are home together all day.	B. Situational crisis
5.3. A middle-aged man is diagnosed with type 2 diabetes and must make significant dietary changes and take insulin.	C. Social crisis

~~Answer: 5.1 C; 5.2 A; 5.3 B~~

~~—6. Which of the following is not a goal of crisis intervention?~~

- ~~A. Establishing long-term therapeutic support for the patient~~
- ~~B. Resolving the patient's psychological trauma~~
- ~~C. Alleviating the patient's acute physical and mental distress~~
- ~~D. Enabling the patient to return to independent functioning~~

~~Answer: A~~

~~—7. A nurse asks a woman whose husband died unexpectedly questions to determine her level of functioning before her husband died. The nurse is engaged in which stage of the nursing process?~~

- ~~A. Assessment~~
- ~~B. Identification~~
- ~~C. Implementation~~
- ~~D. Evaluation~~

~~Answer: A~~

~~—8. Which of the following are appropriate questions to ask during the evaluation stage when treating a patient for psychological trauma incurred during a crisis (select all that apply)?~~

- ~~A. Does the patient have a plan in case a similar stressor occurs again?~~
- ~~B. Has the patient gained insight into the crisis and his response to it?~~
- ~~C. Is the patient in need of basic support services to feel physically secure?~~
- ~~D. Has the patient identified support systems to use going forward?~~
- ~~E. Would the patient be treated more appropriately as an individual or in a family unit?~~

~~Answers: A, B, D~~

~~—9. In the aftermath of a natural disaster, nurses should perform the following actions. Place these actions in the order in which they should be carried out.~~

- ~~A. Consider the families and communities of those directly affected by the disaster who may be traumatized by 24/7 cable news and Internet news coverage of the event.~~
- ~~B. Seek out survivors and help them address feelings of anger and helplessness that may be paralyzing them.~~
- ~~C. Ensure that individuals' basic physical needs for food, water, and sleep are met.~~
- ~~D. Assist individuals in achieving a sense of security and control, often by finding more permanent housing.~~

Answer: C, D, B, A

—10. When a nurse tells a child survivor that the nurses, police officers, and firefighters are doing everything possible to make the situation better, the nurse is using which crisis support strategy?

- A. Acting as a role model
- B. Assessing for signs of psychosocial distress
- C. Fostering expression of feelings
- D. Providing verbal reassurance

Answer: D

—11. While all individuals can be affected in some way by a community disaster, which group(s) is/are at greater than average risk for needing long-term mental health support after the disaster?

- A. Children
- B. Women
- C. First responders
- D. A and C
- E. All of the aforementioned

Answer: D

—12. Mental health nurses can play an important role in community disasters by:

- A. Reporting to the disaster site as soon as they learn of the crisis
- B. Becoming familiar with their community's and agency's disaster plans
- C. Participating in local classes that offer certification in disaster training
- D. All of the aforementioned
- E. B and C

Answer: E

—13. During the initial response to a large-scale natural disaster, which ethical principle is given highest priority?

- A. Utilitarianism—do the greatest good for the greatest number of people
- B. Autonomy—allow each individual to make choices and decisions that seem best
- C. Justice—provide equal treatment to every victim of the disaster
- D. Fairness—divide available resources evenly among all disaster victims

Answer: A

—14. Many people who experience a terrorist attack demonstrate resilience and are able to recover emotionally and physically as individuals and community members. Which of the following has (have) a positive impact on the level of resilience of individuals and communities following a terrorist attack?

- A. Strong tangible and psychosocial support from stable and caring families
- B. Trustworthy, honest communication from governments and institutions
- C. A return to normal and familiar everyday routines
- D. Watching frequent news coverage of the terrorist attack
- E. A, B, and C
- F. A, B, and D

| Answer: E

| —15. When initially approaching a client who is experiencing an acute mental health crisis, the mental health nurse should:

- | A. Mirror the patient's nonverbal body language
- | B. Smile warmly throughout the conversation
- | C. Use a clear, calm voice along with a relaxed posture
- | D. Hold the client's hand or touch the shoulder

| Answer: C

| —16. A client who is experiencing a situational crisis is likely to exhibit which of the following behaviors?

- | A. Euphoria
- | B. Insomnia or hypersomnia
- | C. Social withdrawal
- | D. B and C
- | E. All of the aforementioned

| Answer: D

~~—17. One characteristic that is common to almost all community crises and mass disasters is that the destructive event or catastrophe creates a need for health care, social services, and equipment that exceeds local resources.~~

~~Answer: True~~

~~—18. Interdisciplinary disaster training classes and simulations decrease the likelihood of effective team response in an actual mass disaster.~~

~~Answer: False~~

Chapter 7

Psychiatric Case Management

—1. Which of the following is not a characteristic of psychiatric case management?

- A. Managed care delivery with the goal of cost containment
- B. Less fragmentation of health care services
- C. Coordination of care among diverse providers
- D. Reduction of costs while increasing quality of care

Answer: A

—2. Which of the following was a significant cause of growth in psychiatric case management?

- A. The more human approach toward mental health care adopted in the 19th century
- B. The dissemination of Freud's psychoanalytic approach in the early 20th century
- C. The deinstitutionalization of many mentally ill patients in the 1960s
- D. The development of many new psychopharmacological agents in the 1990s

Answer: C

—3. Match the services offered to the relevant psychiatric case management model

3.1. The psychiatric case manager in a community mental health center is responsible for referral, placement, and monitoring of patients	A. Inpatient model
3.2. Multidisciplinary, team-based support services, which may include 24/7 crisis intervention, are provided in the community	B. Continuum of care model
3.3. Hospitalized patients are transitioned as quickly as possible to a community setting	C. Broker psychiatric case management model
3.4. A managed care agent acts as an advocate for a patient presenting to a hospital's emergency department	D. Clinical psychiatric case management model

Answer: 3.1 C, 3.2 D, 3.3 B, 3.4 A

—4. A psychiatric case manager needs which of the following skills (select all that apply)?

- A. Critical thinking
- B. Accounting
- C. Communication
- D. Collaboration
- E. Negotiation

Answers: A, C, D, E

—5. When a psychiatric case manager collects data from the patient and family members as well as the patient's past utilization of health care services, the psychiatric case manager is involved in which of the following psychiatric case management functions?

- A. Assessment
- B. Planning
- C. Monitoring
- D. Evaluation

Answer: A

—6. When a psychiatric case manager explains to a patient's family the likely course of a mental health illness and its prognosis, the psychiatric case manager is assuming which one of the following roles?

- A. Mentor
- B. Liaison
- C. Advocate
- D. Educator

Answer: D

—7. A psychiatric case manager is providing Level Three psychiatric case management services to a patient. Which one of the following services falls into this category?

- A. Admitting the patient to an inpatient facility
- B. Providing a hotline telephone number
- C. Transporting the patient to an outpatient clinic
- D. Arranging for home visits by a nurse

Answer: B

—8. An evidence-based study would use which of the following to evaluate the effectiveness of a psychiatric case management approach (select all that apply)?

- A. Patient reports of quality of life
- B. Number of hospitalizations
- C. Compliance with medication
- D. Number of psychiatric case managers employed
- E. Provider-to-patient ratios

Answer: A, B, C

—9. Patients who require a more intensive clinical case manager include the following:

- A. Incarceration
- B. Low-paying jobs
- C. Substance abuse
- D. Both A and C

Answer: D

—10. According to the American Nurses Association (ANA) the framework for nursing case management includes all of the following except ____.

- A. Interaction

~~B. Action~~

~~C. Planning~~

~~D. Assessment~~

Answer: B

—11. The psychiatric nurse role encompasses inpatient as well as outpatient settings. Nursing interventions which support the patient's highest level of functioning include the following

- A. Supportive counseling
- B. Medication monitoring
- C. Risk assessment
- D. All of the above

Answer: D

—12. The continuum of care model is also known as the ____.

- A. Colorado model
- B. Inpatient model
- C. Broker-case model
- D. Clinical case management model

Answer: A

—13. In order for a case manager to be successful

- A. Cooperation between the case manager and individual is essential to promote compliance with the treatment plan
- B. Needs should be identified early
- C. Case manager should focus solely on the services the case manager has to offer
- D. Both A and B

Answer: D

—14. Research suggests the optimal case manager to client ratio ranges from

- A. 1:10 to 1:20
- B. 1:12 to 1:15
- C. 1:15 to 1:25
- D. 1:8 to 1:20

Answer: B

—15. Determining the level of case management is based on an evaluation, which includes all of the following except ____.

- A. Social resources
- B. Safety
- C. Finances
- D. Willingness

Answer: C

—16. How is quality in case management measured?

- A. Reduction in hospitalization
- B. Improved quality of life
- C. Revenue
- D. Both A and B

| Answer: D

Chapter 8

Known Risk Factors for Prevalent Mental Illness
and Nursing Interventions for Prevention

—1. When working with a patient with several risk factors for mental illness, a nurse would not which of the following as being protective factors?

- A. Lack of friendships
- B. Absence of mental health conditions in family members
- C. Father's arrest record
- D. Address in high-poverty, high-crime neighborhood

Answer: B

—2. A nurse is describing a patient's risk factors for mental illness. Which of the following would he describe as a biological risk factor?

- A. Patient's mother was treated for depression
- B. Patient has difficulty communicating wants and needs to others
- C. Patient's three children all have special needs, and patient has no parenting partner
- D. Patient recently moved from Chicago to Los Angeles

Answer: A

—3. A child with which one of the following temperaments is most at risk of developing mental health problems?

- A. Slow to warm up or cautious
- B. Easy or flexible
- C. Any temperament that lacks goodness-of-fit with parent's temperament
- D. Difficult, active, or feisty

Answer: C

—4. When evaluating a patient who has been experiencing auditory hallucinations, the nurse would note which one of the following as a risk factor for schizophrenia (select all that apply)?

- A. Patient receives supplemental nutritional assistance (food stamps)
- B. Patient dropped out of high school
- C. Patient was born in March
- D. No one in the patient's extended family has been diagnosed with schizophrenia
- E. Patient uses marijuana and cocaine on a regular basis

Answers: A, C, E

—5. When a nurse evaluates a patient's family history, which of the following factors suggests a risk for bipolar disorder?

- A. Two previous manic episodes, the first one at the age of 25 years
- B. A history of depression, for which the patient has never been hospitalized
- C. A diagnosis of obsessive-compulsive disorder
- D. A sibling with a diagnosis of depression

Answer: C

—6. A nurse is evaluating a patient who reports drinking socially, sometimes heavily, and having experimented with illegal drugs. Which of the following has not been identified as a risk factor for substance-related disorders?

- A. History of depression
- B. Impulsive personality
- C. First drinking alcohol at the age of 12 years
- D. Employment in a liquor store

Answer: D

—7. Posttraumatic stress disorder (PTSD) is classified as an anxiety disorder. Which of the following is implicated in PTSD?

- A. Prolonged stress due to a low-paying job where the patient has little control
- B. A secure, happy childhood
- C. A head injury that occurred before or during a traumatic event
- D. Poor physical health

Answer: C

—8. Which of the following personality disorders have female gender as a risk factor?

- A. Borderline personality disorder
- B. Narcissistic personality disorder
- C. Schizotypal personality disorder
- D. Antisocial personality disorder

Answer: A

—9. Match the following nursing activities to the corresponding preventive strategy.

9.1. The nurse leads community drug education programs as a way of increasing awareness of the risks of drug use A. Primary prevention

9.2. The nurse refers a patient who thinks she might have a problem with alcohol to an Alcoholics Anonymous group that meets in the caller's neighborhood B. Tertiary prevention

9.3. The nurse observes that a patient with schizophrenia is not responding to medication and refers the patient to his psychiatrist for management C. Secondary prevention

|

| ~~Answer: 9.1 A; 9.2 B; 9.3 C~~

Chapter 9

Systems Concepts and Working in Groups

—1. In a lecture on the application of systems theory to nursing, the instructor mentions Martha Rogers's *The Science of Unitary Man*. Which of the following ideas is central to this Rogers's work?

- A. The individual and the environment are separate systems that interact at key moments
- B. Changes in the environment act on the individual, and the individual responds
- C. The individual is an active participant within the environment, and the individual and environment act on each other
- D. The individual, driven by unconscious cues, has unanticipated effects on the environment.

Answer: C

—2. According to Neuman's systems model, a nurse who counsels patients on diet and exercise with a goal of preventing type 2 diabetes is engaged in which of the following?

- A. Expanding the normal line of defense or strengthening the flexible line of defense
- B. Achieving renewed balance within each patient's system
- C. Introducing stressors to the patients' lives to counteract the stressor of obesity
- D. None of the above, because Neuman's systems model applies only to groups and communities

Answer: A

—3. When considering either inpatient or outpatient group therapy for a patient, a nurse would consider which of the following factors (select all that apply)?

- A. The patient's need for stability of relationships
- B. Whether the acuity of the patient's condition requires an inpatient setting
- C. The patient's attitude toward authority
- D. The patient's willingness to impart information
- E. Whether the flexibility of the patient's schedule allows the patient to attend every meeting

Answers: A, B

—4. A patient who has recently undergone an organ transplant joins a therapeutic group of fellow transplant recipients that will meet once a month for 6 months under the direction of a nurse and then disband. Which of the following most closely describes this group?

- A. Closed, insight-oriented
- B. Closed, supportive
- C. Open, insight-oriented
- D. Open, supportive

Answer: B

~~—5. A nurse who is leading a therapy group structures opportunities for self-observation by group members and encourages them to reflect on the impact of their behaviors and others' behaviors on the group. The nurse is fostering which curative factor?~~

~~A. Existential factors~~

~~B. Universality~~

~~C. Development of socialization techniques~~

~~D. Interpersonal learning~~

~~Answer: D~~

~~—6. Match the following descriptions of groups to the corresponding stages of group development.~~

6.1. Patients are polite and nonconfrontational, and they may not reveal their true feelings A. Orientation

6.2. Patients may feel a sense of loss and abandonment B. Working

6.3. Patients come to rely more on each other and less on the leader to manage the group C. Termination

~~Answer: 6.1—A; 6.2—C; 6.3—B~~

~~—7. Match the following therapeutic group leader's tasks to the stages of group development in which they typically predominate.~~

7.1. Reflect aloud on observations of group members' behaviors A. Orientation

7.2. Reinforce expressions of the group's accomplishments B. Working

7.3. Point out common experiences among group members C. Termination

~~Answer: 7.1—B; 7.2—C; 7.3—A~~

~~—8. During family therapy sessions, a nurse realizes that the mother frequently allies with her daughter against the father. This is an example of which of Bowen's concepts of family functioning?~~

~~A. Multigenerational transmission of anxiety~~

~~B. Differentiation of self~~

~~C. Emotional triangles~~

~~D. Genogram generation~~

~~Answer: C~~

~~—9. Which of the following is true of individual therapy and group therapy?~~

~~A. Change takes place at the same rate for each patient in a group, whereas patients in individual therapy may change at different rates~~

~~B. Both are within the scope of practice for nurses with bachelor's degrees~~

~~C. Group therapy takes into account the patient's relationships with others, whereas individual therapy considers the patient in isolation~~

~~D. In both, the therapist engages the patient(s) in evaluation of the direction and effectiveness of the therapeutic approach~~

~~Answer: D~~

Chapter 10

Theories of Mental Health and Illness: Psychodynamic, Social, Cognitive, Behavioral, Humanistic, and Biological Influences

—1. Which of the following reflects the questions represented by the phrase “nature versus nurture”?

A. Is a predisposition to schizophrenia inherited from one’s parents, or is the disease triggered by environmental factors?

B. Is depression in adults more often caused by childhood experiences or by trauma later in life?

C. Is bipolar disorder characterized primarily by atypical neurochemistry or by a pattern of feelings and behaviors?

D. Is autism primarily a result of a few genes, or does it result from many genes working in combination?

Answer: A

—2. Due to tremendous increases in scientific understanding of the causes and treatment of psychiatric conditions, mental illness cannot properly be described as an epidemic in the United States today.

Answer: False

—3. Match the following descriptions to their corresponding theory of mental health and psychology.

3.1. A focus on neuropsychology, genetics, and evolution

A. Psychodynamic theory

3.2. An emphasis on group dynamics and the mind–body connection

B. Biological psychology theory

3.3. An approach that stresses observable behavior as the appropriate subject for psychology

C. Behavioral psychology theory

3.4. Explaining human behavior by exploring past experiences and taking into account biological drives

D. Social psychological theory

Answer: 1.1–B; 1.2–D; 1.3–C; 1.4–A

—4. A patient is feeling overwhelmed after a recent promotion at work and has mentioned getting a poor review from her manager, who did not want her to get the promotion. Rather than discuss how to confront her manager or the possibility that she is not a good fit for the position, she insists that her assistant is primarily responsible for her difficulties. Which of the following ego-defense mechanisms is this patient engaged in?

A. Projection

B. Intellectualization

C. Displacement

D. Sublimation

Answer: C

—5. Which of the following of Erikson’s stages of psychosocial development is most appropriate for a 6-year-old child to exhibit?

A. Trust versus mistrust

B. Industry versus inferiority

~~C. Affiliation and love~~

~~D. Autonomy versus shame~~

Answer: B

—6. A nurse cites Albert Bandura as a leading influence on her approach to psychiatric mental health. Which of the following is she most likely to emphasize in her practice (select all that apply)?

~~A. Helping substance abusers to explore the cognitive dissonance they experience when they attempt to reconcile the outcomes of their behavior with a belief that they do not have a problem.~~

~~B. Working with patients with depression and anxiety to develop their sense of self-efficacy so they feel capable of achieving the goals of therapy.~~

~~C. Exploring with a young adult offender his exposure to violence at home and in the community as he was growing up.~~

~~D. Group therapy in which patients with personality disorders can observe others with similar disorders and choose which of their behaviors to model.~~

~~E. Developing a structure of rewards and disincentives to support residents of a group home in regulating their behavior~~

Answers: B, C, D

—7. When leading a discussion about cognitive theories of mental health, a nursing instructor would most appropriately mention the contributions of which of the following?

~~A. Aaron Beck and Albert Ellis~~

~~B. Kurt Lewin and Leon Festinger~~

~~C. John Watson and Joseph Wolpe~~

~~D. Alfred Adler and Carl Jung~~

Answer: A

—8. A nurse emphasizes holistic care of the patient that considers health of mind, body, and spirit and emphasizes freely finding purpose in life as a means to recovery. This nurse is most likely working in which of the following traditions?

~~A. Social theories~~

~~B. Behavioral theories~~

~~C. Cognitive theories~~

~~D. Humanist theories~~

Answer: D

—9. Working on a research team, a nurse collects information about patients' mental health status, risk factors for heart disease and stroke, and family history of mental disorder and cardiovascular disease. This nurse is engaged in studying which of the following?

~~A. Cognitive dissonance~~

~~B. Psychobiology~~

~~C. Systematic desensitization~~

~~D. Grand theory formation~~

Answer: B

—10. The main categories of theory described by Smith and Liehr (2003), include:

~~A. Grand and micro level~~

~~B. Middle-range~~

~~C. Micro-level~~

~~D. All of the aforementioned~~

~~Answer: D~~

~~—11. There is no full disciplinary, interdisciplinary, or subspecialty consensus on the value, validity, or reliability of the understandings of mental illness.~~

~~Answer: True~~

~~—12. Social theorists include:~~

~~A. Bandura~~

~~B. Lewin~~

~~C. Festinger~~

~~D. All of the aforementioned~~

~~Answer: D~~

~~—13. Biological psychology theory includes:~~

~~A. Brain physiology~~

~~B. Genetics~~

~~C. Evolution as means for understanding behavior~~

~~D. All of the aforementioned~~

~~Answer: D~~

~~—14. Which of the following apply to Jean Watson?~~

~~A. She is a nurse theorist~~

~~B. She developed a theory of human caring~~

~~C. Her caring theory work includes 10 clinical Caritas processes that can be applied by mental health professionals when promoting positive therapeutic outcomes of patients experiencing hopelessness, depression, anxiety, and other mental health and illness conditions~~

~~D. All of the aforementioned~~

~~Answer: D~~

Chapter 11

Schizophrenia Spectrum and Other Psychotic Disorders

—1. Which of the following is true about the epidemiology of schizophrenia spectrum disorders (SSDs) (select all that apply)?

- A. The incidence of SSDs is about equal in males and females.
- B. Immigrants are at significantly greater risk of incidence and prevalence than are native-born individuals.
- C. The standard mortality rate among persons with SSDs has been falling and is expected to continue to decline.
- D. Persons living further from the equator are more likely to have SSDs than those living nearer the equator.
- E. Remission from SSDs is clearly defined in the literature and has been definitively measured among different populations.

Answers: B, D

—2. A patient presents with hallucinations and delusions. Which additional symptoms are suggestive of schizophrenia?

- A. The patient has been diagnosed in the past as having severe depression.
- B. The thought disturbances began approximately 1 week ago.
- C. The patient is articulate and can describe the hallucinations in vivid and exact detail.
- D. The patient has experienced reduced motivation and withdrawn socially since the onset of the illness.

Answer: D

—3. A nurse sees the word “alogia” on a patient’s chart. The nurse can expect to observe which of the following behaviors in that patient?

- A. The patient speaks very little.
- B. The patient is unable to take pleasure in life.
- C. The patient imitates the nurse’s words and actions.
- D. The patient believes that health care providers are trying to harm him.

Answer: A

—4. Which of the following have been identified as possible neurological components of SSDs (select all that apply)?

- A. Enlargement of the cerebral lateral ventricles
- B. Deregulation of dopamine
- C. Abnormal NMDA glutamate receptors
- D. Decreased volume of the hippocampus
- E. Higher than normal levels of activity in the visual cortex

Answers: A, B, C, D

—5. Which of the following is a common side effect of both first- and second-generation antipsychotic drugs (select all that apply)?

- A. Agranulocytosis, marked by acute fever and depressed bone marrow function
- B. Lack of adherence to medication schedule
- C. Metabolic effects, such as weight gain and diabetes
- D. Extrapyramidal side effects, such as parkinsonism
- E. Neuroleptic malignant syndrome

Answers: B, D, E

—6. Which of the following is a goal of cognitive rehabilitation therapy?

- A. To change the way the patient perceives psychotic symptoms
- B. To improve the patient's compliance with the medication schedule
- C. To improve the patient's memory and thinking
- D. To facilitate the patient's activities of daily living

Answer: C

—7. A patient is referred to integrated dual-diagnosis treatment (IDDT). Which of the following would be an appropriate component of this therapeutic approach?

- A. An emphasis on eliminating risky behaviors, including substance abuse
- B. A focus on counseling the family about psychopathology and addressing any guilt or shame family members feel about the patient's diagnosis
- C. An incremental approach to ensuring the safety of the patient, including the provision of housing that allows substance use
- D. Treatment by a single specialist in comorbid mental health and substance abuse disorders

Answer: C

—8. To enter into a therapeutic interpersonal relationship with a patient with schizophrenia, a nurse takes careful stock of his own preconceptions about individuals with SSDs. The nurse then emphasizes all of the following in the care of the patient except:

- A. Establishing respectful boundaries vis-à-vis interpersonal space
- B. Agreeing with the patient if she expresses delusional beliefs
- C. Encouraging the patient to talk about her feelings about any hallucinations she is experiencing
- D. Understanding that schizophrenia is frequently a disabling illness that makes it impossible for an otherwise able-bodied adult to hold a job or maintain socially acceptable personal hygiene

Answer: B

—9. During initial assessment, if a patient is too disoriented or agitated for a full assessment to be conducted, the nurse should prioritize which of the following?

- A. Psychiatric history, including previous hospitalizations, medications previously prescribed, and diagnoses given
- B. Legal history, especially current parole status, if any
- C. History of trauma, including childhood abuse
- D. Suicidal/homicidal ideation and any physical injuries

Answer: D

—10. Which of the following would be a significant impediment to empowering the patient with a diagnosis of SSD?

~~A. Anosognosia~~

~~B. Echolalia~~

~~C. Shortage of inpatient beds~~

~~D. The patient's expressed wish for occupational therapy~~

~~Answer: A~~

~~—11. A nurse is assessing an agitated patient newly arrived to the emergency room (ER). The patient responds to the nurse's question "Did you take your medication today?" by answering: "I left my medication on the kitchen counter. I have a yellow pill, a blue pill and a green pill. Sometimes I feel like one of the pills gets stuck in my throat and I have to drink a lot of water. I don't like that feeling of a pill being stuck in my throat." This is an example of what kind of disturbed speech:~~

~~A. Loose associations~~

~~B. Flight of ideas~~

~~C. Circumstantiality~~

~~D. World salad~~

~~Answer: C~~

~~—12. The nurse is completing an assessment for a newly admitted patient with schizophrenia to the inpatient unit. Why is it important for the nurse to obtain a detailed medical history including cardiac, metabolic, and infectious disease status?~~

~~A. People with schizophrenia do not receive adequate health care and treatment as compared to the general population.~~

~~B. People with schizophrenia have a shortened life span of approximately 15 to 25 years.~~

~~C. A and B~~

~~D. It is a legal requirement to always ask about general medical conditions when admitting a patient to the psychiatric unit.~~

~~Answer: C~~

~~—13. A male patient who is taking the second-generation antipsychotic Risperdal reports to the nurse that he has observed a clear fluid leaking from his right nipple for the past month. The nurse's best initial intervention is:~~

~~A. Inform the physician so that a prolactin level can be ordered.~~

~~B. Tell the patient that it is nothing to worry about.~~

~~C. Inform the patient that this could be a side effect of the Risperdal.~~

~~D. Tell the patient that the medication must be discontinued.~~

~~Answer: C~~

~~—14. A patient with schizophrenia believes that she has a special connection with and receives top-secret messages from the President. This is an example of which type of delusional belief?~~

~~A. Grandiosity~~

~~B. Somatic~~

~~C. Reference~~

~~D. Persecution~~

~~Answer: A~~

~~—15. After establishing a therapeutic relationship, the nurse assists the patient to mindfully attend to their voices. The priority intervention for the nurse is to:~~

- | ~~A. Tell the patient to try to ignore the voices.~~
- | ~~B. Turn on TV or radio to distract the patient.~~
- | ~~C. Administer a PRN sedative so that the patient can relax.~~
- | ~~D. Assist the patient to bring patient's full attention and awareness to the voices in the present.~~
- | Answer: D

Chapter 12

Bipolar and Related (Mood) Disorders

—1. Place the following developments in the treatment of affective disorders in chronological order:

- A. Electroshock therapy
- B. Monoamine oxidase inhibitors
- C. Hypnosis
- D. Tricyclic antidepressants

Answer: C, A, D, B

—2. Which of the following statements is not true about mood disorders?

- A. Depressive disorders and anxiety disorders usually do not occur in the same person.
- B. Suicide is largely attributable to mental disorders, especially depression and substance abuse.
- C. Women are more likely to suffer than men from major depression and to attempt suicide.
- D. Bipolar disorder is less common than depression, and its age of onset is generally lower.

Answer: A

—3. A patient gave birth about a month ago and now reports being unable to feel interest in her newborn or in anything else she feels should give her pleasure. The nurse should evaluate for which of the following as a postpartum complication?

- A. Bipolar II disorder
- B. Dysthymic disorder
- C. Major depressive disorder
- D. Cyclothymic disorder

Answer: C

—4. A nursing student shows understanding when he describes the difference between bipolar I and bipolar II disorders as follows?

- A. Bipolar I disorder requires psychopharmaceutical treatment, whereas patients with bipolar II disorder can generally be treated by talk therapy only.
- B. Bipolar I disorder is characterized by recurring periods of depressed mood, whereas patients with bipolar II disorder rarely experience depressed mood.
- C. Bipolar I disorder is less severe than bipolar II disorder, as the first involves hypomanic states rather than fully manic states.
- D. Bipolar I disorder is characterized by recurring periods of mania, whereas patients with bipolar II disorder may have experienced only one episode of hypomania.

Answer: D

~~—5. Match the following descriptions to the corresponding theory of development of mood disorders.~~

5.1. The patient feels anger about losing a loved person or that person's love and directs that anger inward against the self.	A. Cognitive theory
5.2. The patient has suffered repeated negative events without recourse and developed an unadaptive locus of control.	B. Psychoanalytic theory
5.3. The patient has developed distorted, negative perceptions and expectations.	C. Learned helplessness

~~Answer: 5.1 B; 5.2 C; 5.3 A~~

~~—6. The physician discusses the appropriateness of prescribing a serotonin/norepinephrine reuptake inhibitor (SNRI) for a patient. Which of the following medications are in this category?~~

~~A. Sertraline and escitalopram~~

~~B. Venlafaxine and duloxetine~~

~~C. Bupropion and mirtazapine~~

~~D. Tranylcypromine and phenelzine sulfate~~

~~Answer: B~~

~~—7. A patient has been prescribed an selective serotonin reuptake inhibitor (SSRI) for depression. The nurse should counsel the patient about which of the following possible side effects, among others?~~

~~A. Fever, sweating, agitation, rapid heartbeat~~

~~B. Persistent dizziness~~

~~C. Stiff neck and vomiting~~

~~D. Blurred vision and ringing in the ears~~

~~Answer: A~~

~~—8. A nurse counsels a patient who has been prescribed a monoamine oxidase inhibitor (MAOI) to treat depression to avoid foods containing tyramine. Which of the following foods should the patient avoid (select all that apply)?~~

~~A. Unripe bananas~~

~~B. Milk and cream~~

~~C. Tofu~~

~~D. Pepperoni~~

~~E. Yogurt~~

~~Answers: C, D, E~~

~~—9. When counseling a patient about to begin a course of electroconvulsive therapy (ECT), the nurse should note which of the following?~~

~~A. ECT is very dangerous and is being prescribed as a last resort.~~

~~B. The patient should expect significant memory impairment as a result of ECT.~~

~~C. Even if the patient receives maintenance ECT, she is unlikely to experience significant cognitive deficits after 1 year.~~

~~D. Once the patient begins ECT, she should no longer take any prescribed medication as it will interfere with the effectiveness of the ECT treatments.~~

~~Answer: C~~

~~—10. It is critical to assess a patient with a mood disorder for suicidal ideation. Which of the following is an appropriate approach to this evaluation?~~

~~A. Avoid using the words “suicide” or “killing yourself,” as this language may suggest the act to a patient who was not thinking about it.~~

~~B. Self-monitor for one’s own anxiety related to this topic and be aware of a tendency to avoid it with the patient.~~

~~C. Note that the patient has given away the plants in her room to other patients as an act of generosity indicating improved mood.~~

~~D. If a patient says, “It’s just not worth it anymore. I really want to end it,” respond in an upbeat manner and attempt to distract the patient from her negative thoughts.~~

~~Answer: B~~

~~—11. It can be helpful when thinking about a client with a mood disorder to view them as someone who is:~~

~~A. in pain~~

~~B. weak~~

~~C. unstable~~

~~D. dangerous~~

~~Answer: A~~

~~—12. One of most effective ways a nurse can *initially* intervene in someone who is suicidal is to:~~

~~A. Remove all potentially harmful objects~~

~~B. Establish a therapeutic rapport~~

~~C. Place them on suicide watch~~

~~D. Call the prescriber to have medication adjusted~~

~~Answer: B~~

~~—13. According to Travelbee, treatment planning between the nurse and the client is best *completed* after the nurse senses experiencing:~~

~~A. The original encounter~~

~~B. Emerging identities~~

~~C. Empathy and sympathy~~

~~D. Boundary testing~~

~~Answer: C~~

~~—14. In thinking about Travelbee’s continuum of suffering, you can reason that a client is most potentially dangerous for self-harm once they have reached:~~

~~A. Transitory feeling of displeasure~~

~~B. Extreme anguish~~

~~C. Malignant phase of despairful not caring~~

~~D. Terminal phase of apathetic indifference~~

~~Answer: D~~

~~—15. A patient tells you that they do not like to take antidepressant medication because it makes them “feel numb.” As a nurse, it would be appropriate to say:~~

~~A. “Have you ever tried therapy for your depression?”~~

| B. ~~“Well, at last that’s better than feeling upset.”~~

| C. ~~“You could skip a couple days to see if that helps.”~~

| D. ~~“Depression is a life long illness, so this is what you can expect.”~~

| Answer: A

—16. A patient with severe kidney disease is started on lithium by a new resident. As the nurse on duty your best initial response would be to:

- A. Arrange to have the clients dialysis increased
- B. Contact the resident to remind him that the client has kidney disease and lithium is contraindicated
- C. Refuse to give the medication and tell the patient why
- D. Contact the residents attending and report him for malpractice

Answer: B

—17. A client asks you your opinion on best treatment for depression, medication or psychotherapy. You can best respond by saying:

- A. You should always try medications first and then if you are still depressed, try therapy.
- B. Therapy is best if you were abused as a child.
- C. Some of the studies seem to support a blend of the two, but other studies support psychotherapy such as cognitive behavioral therapy (CBT) is as effective alone.
- D. All psychiatrists are pill pushers, I would see a psychologist if I were you.

Answer: C

—18. It would not be unusual for a person who is chronically depressed to be treated with

- A. Zoloft
- B. Seroquel
- C. ECT
- D. All of the aforementioned

Answer: D

—19. When developing the plan of care for a patient who has attempted suicide, an understanding of which of the following would be most critical for the nurse to integrate into the plan?

- A. Patients who attempt suicide and fail will not try again.
- B. The more specific the plan, the greater the risk of suicide.
- C. People who talk about suicide rarely go ahead and attempt it.
- D. People who attempt suicide and fail do not really want to die.

Answer: B

—20. In planning care for a patient newly admitted with severe major depressive disorder, the primary nursing intervention would be to:

- A. Avoid a stressful situation by asking for the patient's participation in the plan
- B. Teach the patient about relapse and the signs and symptoms of mania
- C. Assess if the patient has more than 2 weeks worth of medication
- D. Evaluate the patient's cognitive functioning and ability to participate in planning care

Answer: D

—21. The most important reason why a full physical health assessment is warranted for patients with depressive symptoms is that:

- A. They are less likely to complain about their physical health and may have an undiagnosed medical problem.
- B. Physical health complications are likely to arise from antidepressant therapy.

- | C. The attention afforded to the patient during the assessment is beneficial in decreasing social isolation.
- | D. Physiological changes may be the underlying cause of depression, and, if present, must be addressed.
- | Answer: D

—22. The psychiatric nurse understands that dysthymia differs from a major depression episode in that persistent depressive disorder:

- A. Typically has an acute onset
- B. Involves delusional thinking
- C. Is a chronic low-level depression
- D. Does not include suicidal ideation

Answer: C

Chapter 13

Anxiety Disorders, Obsessive-Compulsive-Related Disorders, and Trauma- and Stress-Related Disorders

—1. Place the following terms for anxiety disorders in order according to their date of first use.

- A. Hysteria
- B. Posttraumatic stress disorder
- C. Agoraphobia
- D. Anxiety neurosis

Answer: C, A, D, B

—2. When giving a presentation on the epidemiology of mental health disorders, a nursing instructor should identify which one of the following as the most common disorder?

- A. Depression
- B. Anxiety
- C. Schizophrenia
- D. Posttraumatic stress disorder

Answer: B

—3. A patient describes feeling worried about financial security, the status of her marriage, the success of her children in school, and whether her car is safe to drive. The nurse would most appropriately explore which of the following disorders as a diagnosis for this patient?

- A. Generalized anxiety disorder
- B. Panic disorder
- C. Phobias
- D. Obsessive-compulsive disorder

Answer: A

—4. A nurse suspects that a military veteran has posttraumatic stress disorder (PTSD). Which of the following symptoms should she first explore with this patient (select all that apply)?

- A. Whether the patient reexperiences a traumatic event when triggered by certain stimuli
- B. Whether the patient consciously or unconsciously attempts to avoid all emotions in an attempt to avoid feelings associated with a traumatic event
- C. Whether the patient experiences ongoing stress at home, at work, or in other activities
- D. Whether the patient suffers the sudden onset of terror or dread due to no discernible trigger
- E. Whether the patient feels driven to alleviate anxiety by engaging in repetitive or ritualistic behavior to an extent that disrupts his life

Answers: A, B

—5. Hildegard Peplau suggested that a nurse intervene in which of the following ways for a patient suffering an acute panic attack?

- A. Do nothing. Nursing interventions are not effective in cases of panic attack.
- B. Engage the patient in talk therapy and cognitive reframing.
- C. Protect the person from self-injury and protect the environment from harm.
- D. Remain with the patient until symptoms of panic abate.

Answer: D

—6. To help a patient understand her anxiety disorder, a nurse explains the role of the amygdala in anxiety. Which of the following is an accurate description of the amygdala's role?

- A. It is a reservoir of neurotransmitters, especially gamma-aminobutyric acid (GABA), and when it is functioning properly, it ensures that the brain has enough of each neurotransmitter to regulate emotion.
- B. It is a small structure in the brain that, through its connections to other parts of the brain, integrates sensory and cognitive information so that the brain can determine whether to feel fear.
- C. It inhibits or reduces the activity of the hippocampus and other parts of the brain to regulate emotional responses to an appropriate level.
- D. It is primarily responsible for regulating the physical responses to stress, such as heart rate, blood pressure, respiratory rate, perspiration, and nightmares.

Answer: B

—7. Which of the following is generally true of medications used to treat anxiety disorders?

- A. There is little overlap between the medications used for anxiety disorders and those used to treat depression.
- B. Most patients see improvement of symptoms within 1 to 2 weeks of starting medication.
- C. Just as with depression, the most common medications prescribed are serotonin reuptake inhibitors (SSRIs) and selective norepinephrine reuptake inhibitors (SNRIs).
- D. A patient who has been prescribed an SSRI in the past for depression can expect to be prescribed a smaller dosage for a current anxiety disorder.

Answer: C

—8. A patient says she has been taking kava kava to alleviate symptoms of anxiety. Which of the following is an appropriate nursing response?

- A. Warn the patient that herbal remedies, including kava kava, have no documented positive effects and can have adverse effects.
- B. Inform the patient that kava kava has been documented to help some patients with anxiety but that it can be toxic at some dosages and interact with benzodiazepines.
- C. Inform the patient that kava kava is just as effective as benzodiazepines and is better because it is natural.
- D. Tell the patient that taking kava kava is all right because it has no harmful effects but that it also will not do any good.

Answer: B

—9. A patient with PTSD that has not responded to a combination of psychopharmaceutical and talk therapies says that he has heard “a new eye movement therapy” might help. Which of the following would be an accurate response by the nurse?

A. “Eye movement desensitization and reprocessing (EMDR) is a new therapy that is highly recommended for many anxiety disorders but not for PTSD. It involves having you focus on troubling thoughts and certain physical stimuli at the same time.”

B. “Eye movement desensitization and reprocessing (EMDR) is a variation on the established therapy of biofeedback. It may be effective, but it is too expensive and trained therapists are too rare for it to be practical for most patients.”

C. “Eye movement desensitization and reprocessing (EMDR) is a new therapy that is highly controversial. It involves moving your eyes while accessing troubling memories, and it is not supported by evidence.”

D. “Eye movement desensitization and reprocessing (EMDR) is a new therapy that the Department of Veterans Affairs and the Department of Defense highly recommend for PTSD. It involves having you focus on troubling memories or triggers and certain physical stimuli at the same time.”

Answer: D

—10. A nursing colleague is transferring a patient to another nurse’s care after intake but before thorough assessment. Which of the following symptoms suggest the patient should be evaluated for an anxiety disorder (select all that apply)?

A. Auditory and visual hallucinations

B. Loss of energy and motivation

C. Shakiness and trembling

D. Difficulty maintaining close or long-term relationships

E. A reluctance to fall asleep or leave home

Answers: C, E

—11. Which of the following best articulates Peplau’s description of severe anxiety?

A. A person’s libidinal impulses of the id taking over at an inopportune time

B. A person’s thoughts become scattered and they are unable to use the learning process to make decisions

C. A positive motivator for growth and success

D. A conditioned response to an unpleasant stimulus

Answer: B

—12. Which statement regarding hoarding disorder is true?

A. Patients who hoard exhibit dysfunction in the basal ganglia.

B. The prevalence of hoarding disorder is higher in women.

C. Hoarding disorder only occurs after an identifiable traumatic event.

D. Patients may hold on to items due to the perceived usefulness, aesthetic value, or for sentimental reasons.

Answer: D

—13. Which nursing intervention is most appropriate for a patient experiencing an acute stress response arising from a specific phobia?

A. Reexposure to the specific phobia

B. Providing an environment that has direct sunlight

C. Maintaining a calm, reassuring approach

~~D. Providing psychoeducation~~

~~Answer: C~~

~~—14. The exact etiology of anxiety disorders is:~~

~~A. Not known~~

~~B. Due to genetic vulnerability~~

~~C. Due to a malfunctioning of amygdala-centered circuits~~

~~D. Due to conflicting demands on the id, ego, and superego~~

~~Answer: A~~

~~—15. A patient is being treated for the effects of combat-related PTSD in a virtual, three-dimensional environment. This is known as:~~

~~A. Deep brain stimulation~~

~~B. Eye movement desensitization and reprocessing~~

~~C. Virtual reality exposure therapy~~

~~D. Biofeedback~~

~~Answer: C~~

~~—16. Transcranial magnetic stimulation has been researched in patients with the following disorders:~~

~~A. Body dysmorphic disorder~~

~~B. Posttraumatic stress disorder~~

~~C. Generalized anxiety disorder~~

~~D. Social anxiety~~

~~Answer: B~~

~~—17. Which two anxiety disorders require additional assessment information beyond an overall MSE?~~

~~A. Social phobia and specific phobias~~

~~B. Generalized anxiety disorder and body dysmorphic disorder~~

~~C. Hoarding disorder and acute stress disorder~~

~~D. Obsessive-compulsive disorder and PTSD~~

~~Answer: D~~

~~—18. Which statement regarding the treatment of anxiety disorders is false?~~

~~A. Most likely require concomitant use of nonpharmacological and pharmacological strategies.~~

~~B. Selective serotonin reuptake inhibitors (SSRIs) and selective norepinephrine reuptake inhibitors (SNRIs) are the drugs of choice for treating anxiety disorders.~~

~~C. Benzodiazepines are first-line drugs for anxiety disorders.~~

~~D. Peplau believed that clearly identifying and understanding the type of anxiety an individual is experiencing is pivotal for good nursing care.~~

~~Answer: C~~

Chapter 14

Personality Disorders

—1. A physician describes a patient as having a Cluster C personality disorder. The patient could have which of the following (select all that apply)?

- A. ~~Obsessive-compulsive personality disorder~~
- B. ~~Paranoid personality disorder~~
- C. ~~Avoidant personality disorder~~
- D. ~~Borderline personality disorder~~
- E. ~~Narcissistic personality disorder~~

Answers: A, C

—2. A patient expresses a belief that co-workers have been scheming against him and takes the nurse's question "Do you think you might have a mental health issue?" as a personal attack, but the patient does not have hallucinations. The nurse would most appropriately consider exploring which of the following with the patient?

- A. ~~Paranoid schizophrenia~~
- B. ~~Paranoid personality disorder~~
- C. ~~Schizoid personality disorder~~
- D. ~~Social phobia~~

Answer: B

—3. An adolescent has not been living with her parents and in particular has difficulty getting along with her mother. She describes her mother as constantly bragging about imaginary accomplishments and demanding that other family members agree with her in all matters. The nurse would most appropriately educate the client about which of the following?

- A. ~~Antisocial personality disorder~~
- B. ~~Narcissistic personality disorder~~
- C. ~~Dependent personality disorder~~
- D. ~~Bipolar disorder~~

Answer: B

—4. Match the problematic behavior to the type of psychopharmaceutical agent most likely to address it.

4.1. Hostility and aggression	A. Antipsychotics
4.2. Low self-esteem	B. Antidepressants
4.3. Overly intense feelings and impulsivity	C. Mood stabilizers
4.4. Disorganized thinking	D. Anticonvulsants

Answer: 4.1 C; 4.2 B; 4.3 D; 4.4 A

—5. For which one of the following types of drugs is the consumption of grapefruit juice contraindicated?

- A. Serotonin/norepinephrine reuptake inhibitors (SNRIs)
- B. Mood stabilizers
- C. Anticonvulsants
- D. Second-generation antipsychotics

Answer: D

—6. When treating a patient with borderline personality disorder, the nurse might ethically establish an anti-self-harm contract with that patient in order to:

- A. Establish legal protection in case of patient self-harm.
- B. Set up this patient to be a role model for other patients in a group home or inpatient setting.
- C. Empower the patient by allowing the patient to participate in setting expectations.
- D. Reduce the risk of suicide so that the health care staff do not have to monitor the patient as closely.

Answer: C

—7. In a debriefing session, a nurse describes his struggles with limit setting and confrontation with patients. This nurse is referring to which of the following interventions?

- A. Establishing an environment that is physically safe for the patient and safe from any patient's outbursts.
- B. Encouraging patients to confront each other about behaviors they find annoying or disruptive
- C. Establishing a strict medication schedule and insisting that the patient comply before enjoying certain privileges
- D. Clearly delineating expected behavior, describing observed behavior that does not meet expectations, and imposing consequences for disruptive or maladaptive behavior

Answer: D

—8. When working with a patient with a dependent personality disorder, a nurse would most likely engage in which of the following therapeutic interventions?

- A. Help the patient to verbalize feelings assertively and with confidence.
- B. Help the patient to complete tasks in a timely manner.
- C. Adopt a matter-of-fact tone in response to patient expressions of emotions.
- D. Clarify consequences for stealing from other patients.

Answer: A

—9. What nursing diagnosis might be given to a patient with schizoid personality disorder?

- A. Risk for self-directed violence related to unpredictable and erratic behavior as evidenced by impulsivity
- B. Risk for other-directed violence related to pervasive disregard for the rights of others related to absence of empathy
- C. Chronic low self-esteem related to identity disturbance as evidenced by fear of abandonment
- D. Impaired social interaction related to emotional detachment as evidenced by disinterest in close relationships

Answer: D

—10. What nursing outcomes would be appropriate for a patient diagnosed with avoidant personality disorder? The patient will:

- A. Refrain from injuring self
- B. Demonstrate reality-based thoughts

~~C. Demonstrate self-restraint with others~~

~~D. Verbalize positive statements about self and life~~

~~Answer: D~~

~~—11. The patient with antisocial personality disorder is learning appropriate outlets for anger and tension. The nurse will know that more teaching is necessary if the patient says:~~

- ~~A. "Just put me in restraints if I get out of control."~~
- ~~B. "I will practice my deep breathing to help calm me."~~
- ~~C. "Taking time-outs from stressful situations may help me regain control."~~
- ~~D. "If the other interventions aren't working I can take a PRN medication as ordered by my nurse practitioner."~~

~~Answer: A~~

~~—12. The patient reports to the nurse that he has self-mutilated by cutting his arm. Which nursing interventions should be implemented (select all that apply)?~~

- ~~A. Provide care to wounds~~
- ~~B. Obtain an order for tranquilizing medications~~
- ~~C. Work with the patient to determine triggers~~
- ~~D. Provide empathy~~
- ~~E. Positively reinforce the behavior~~
- ~~F. Assist with social skills~~
- ~~G. Perform a risk assessment~~

~~Answers: A, C, G~~

~~—13. The patient diagnosed with narcissistic personality disorder demands at 2 a.m. to speak with the nurse practitioner about the treatment plan. Which nursing statement is appropriate?~~

- ~~A. "Please be quiet and go back to bed. You are waking the other clients."~~
- ~~B. "I can give you medication to help your anxiety."~~
- ~~C. "I can see that you are angry. However, this is not an appropriate time to address your issues."~~
- ~~D. "I will try to page her for you."~~

~~Answer: C~~

~~—14. The nurse provides education to a family about personality disorders. Which of the following statements by the family indicates that education has been effective?~~

- ~~A. "This is a long-term problem and change will be slow."~~
- ~~B. "I am so happy that there is a medication for personality disorders."~~
- ~~C. "I feel bad that our family life has caused these problems."~~
- ~~D. "We could not have avoided this from developing as it directly caused by genetics."~~

~~Answer: A~~

~~—15. The nurse provided education about problem solving to the patient with a personality disorder. The nurse will know that the patient requires additional teaching based on which of the patient's following statements:~~

- ~~A. "The first step for me will be to figure out what the problem is."~~
- ~~B. "I will try not to focus on the consequences of my actions."~~
- ~~C. "I will try to come up with alternative ways to deal with situations."~~
- ~~D. "I will evaluate how I did with my new way of coping."~~

~~Answer: B~~

~~—16. The nurse is completing an initial assessment on a patient diagnosed with obsessive-compulsive personality disorder. What would the nurse expect to see?~~

~~A. Impulsivity and need for immediate gratification~~

~~B. Fear of abandonment~~

~~C. Perfectionism and rigidity~~

~~D. Suspiciousness and feeling of being plotted against~~

~~Answer: C~~

Chapter 15

Substance-Related and Addictive Disorders

—1. A nursing student properly describes substance misuse when she says which of the following?

- A. “Substance misuse is any use of a drug to the point where behavior is significantly impaired.”
- B. “Substance misuse involves the use of any illicit drug but not legally obtained drugs such as caffeine or, for individuals of legal age, alcohol or tobacco.”
- C. “Substance misuse puts the drug user in dangerous situations and compromises the user’s ability to meet employment and relationship commitments.”
- D. “Substance misuse is a condition of significant impairment when the drug is used or discontinued.”

Answer: C

—2. When explaining addiction to family members of a patient who misuses cocaine and alcohol, which of the following would a nurse mention as risk factors (select all that apply)?

- A. Strength of spirituality
- B. Early exposure to adults or friends who misused substances
- C. Educational background
- D. Genetic vulnerability
- E. Comorbid mental illness

Answers: A, C, E

—3. A nurse is helping to conduct research into substance misuse by using functional MRI (fMRI) to track activity in the reward pathways of the brain. The nurse is most likely measuring levels of which of the following?

- A. Dopamine
- B. Serotonin
- C. Norepinephrine
- D. Melatonin

Answer: A

—4. The best therapeutic course for a patient with comorbid substance misuse and other mental health disorders is to deal with the substance misuse first—get the patient on the path to recovery—and then assess and begin treatment of the other disorder.

True-False

Answer: False

—5. Psychopharmaceutical agents are prescribed for individuals with substance misuse disorders for all of the following reasons except:

- A. To mitigate withdrawal symptoms
- B. To elevate the patient’s mood in a manner comparable to the action of the misused substance
- C. To assist the patient in maintaining sobriety
- D. To help manage the obsessive-compulsive aspect of substance misuse

Answer: B

—6. A patient has been prescribed disulfiram. The nurse would most appropriately counsel the patient about which of the following?

- A. Drowsiness that may affect driving and work activities.
- B. A sudden drop in blood pressure that may occur when standing up.
- C. Likelihood of nausea and vomiting as common side effects.
- D. A toxic reaction if alcohol is consumed.

Answer: D

—7. A patient is brought to the emergency department due to a drug overdose and then admitted as an inpatient. When the psychiatric-mental health nurse discusses substance misuse with the patient, he insists he was “just partying” and does not have a problem. Which of the following interventions might the nurse most appropriately carry out next?

- A. Give the patient a brochure listing the websites and contact information for 12-step programs.
- B. Using a nonthreatening approach, confront the patient about his behavior and its outcome.
- C. Monitor the patient for symptoms of withdrawal.
- D. Educate family members who come to visit the patient about addiction and how best they can support the patient in changing his behavior.

Answer: B

—8. A nurse sees on a patient’s chart that the patient was brought to the emergency department with a blood alcohol level of 175 mg percent. Which of the following withdrawal symptoms would the nurse expect to observe?

- A. Delirium tremens
- B. Hepatic failure
- C. Restlessness
- D. Elevated pulse and blood pressure

Answer: D

—9. If a patient develops mydriasis, tachycardia, and diaphoresis, the nurse should suspect which of the following conditions?

- A. Alcohol withdrawal
- B. Stimulant withdrawal
- C. Opioid withdrawal
- D. Opioid intoxication

Answer: C

—10. When a patient is prescribed lithium for pathological gambling, the nurse most appropriately counsels the patient about which of the following?

- A. The drug should not be taken with grapefruit juice.
- B. Weekly blood tests will be needed to monitor for agranulocytosis.
- C. The drug should be taken with a full glass of water.
- D. Blood tests must be done to monitor for drug toxicity, which can result in coma and cardiovascular collapse.

Answer: D

~~—11. Emergency services bring a young man into the emergency department. They say they were called because he overdosed. His friends gave them a bag with a variety of substances. They identified that he had taken opiates, benzodiazepines, and smoked some marijuana. Because they suspected an opioid overdose, and they carry naloxone, they gave him an injection before they brought him in. He still not responsive. Which is unlikely?~~

~~A. He took a great deal of opioids and needs another shot of naloxone.~~

~~B. He is reacting more from the benzodiazepines.~~

~~C. He will be fine when some of the drug mixture gets out of his system.~~

~~D. He overdosed on a substance the friends were not aware of.~~

~~Answer: C~~

~~—12. Parents took their adolescent son to the phenethylamine (PCP). He was complaining of intermittent chills, fever, and muscle stiffness. The doctor was ready to treat him for influenza but the psychiatric-mental health nurse had just learned that those symptoms could be caused by:~~

~~A. Sniffing glue~~

~~B. Snorting heroin~~

~~C. Smoking marijuana~~

~~D. Inhaling n-bombs~~

~~Answer: D~~

~~—13. Three of the six Quality and Safety Education for Nurses (QSEN) competencies apply directly to addictions nursing practice. They are patient-centered care, teamwork and collaboration, and~~

~~A. Safety~~

~~B. Informatics~~

~~C. Evidence-based practice~~

~~D. Quality improvement~~

~~Answer: C~~

~~—14. In 2011, the executive office of the president of the United States declared prescription drug abuse an epidemic. Although all psychoactive medications are abused, the biggest concern was with the abuse of~~

~~A. Benzodiazepines~~

~~B. Opiates~~

~~C. Stimulants~~

~~D. Barbiturates~~

~~Answer: B~~

~~—15. One of the biggest problems with the misuse and abuse of prescription drugs is that~~

~~A. Individuals doctor shop~~

~~B. Individuals get most of the drugs from family and friends~~

~~C. They are easily diverted~~

~~D. Prescription drugs are becoming cheaper to buy.~~

~~Answer: B~~

~~—16. New psychoactive substances (NPS) are an international problem because~~

~~A. They are designer drugs~~

~~B. Everyone has heard of them~~

~~C. They have relatively few side effects~~

~~D. There are no laws governing their sale on the Internet~~

Answer: D

—17. A patient is brought to the emergency department by a friend who states, “He’s been in a lot of pain and has been using oxycodone quite a bit lately.” Which of the following would lead the nurse to suspect that the patient is experiencing intoxication?

- A. Tachycardia
- B. Pinpoint pupils
- C. Rhinorrhea
- D. Gooseflesh

Answer: B

—18. A psychiatric-mental health nurse identifies a nursing diagnosis of defensive coping for a patient being treated for alcohol intoxication. Which statement would support this diagnosis?

- A. “I really just drink when my life gets really stressful.”
- B. “My employer said I might lose my job if things don’t change.”
- C. “I just can’t do anything right, I’m such a failure.”
- D. “My family just seems to be falling apart lately.”

Answer: A

—19. The psychiatric-mental health nurse is using the CAGE assessment tool to screen for alcohol abuse. Which question would the nurse ask first?

- A. “Have you ever had a drink first thing in the morning to steady your nerves?”
- B. “Have people annoyed you by criticizing your drinking?”
- C. “Have you ever felt you should cut down on your drinking?”
- D. “Have you ever felt bad or guilty about your drinking?”

Answer: C

CHAPTER 16

Neurocognitive Disorders

—1. When a patient presents with symptoms of dementia, specifying a clear cause of the dementia is frequently difficult or impossible.

True-False

Answer: True

—2. Match each of the following descriptions to the corresponding condition.

2.1. Early sign is change in personality, including deterioration of social skills	A. Dementia, Alzheimer's type
2.2. Gradual cognitive decline not attributable to impeded blood supply to the brain or Pick's disease	B. Delirium
2.3. Cerebrovascular disease is evident on neurological examination and laboratory findings	C. Frontotemporal dementia
2.4. Onset is relatively sudden	D. Dementia, vascular type

Answer: 2.1 C; 2.2 A; 2.3 D; 2.4 B

—3. During her physical examination, a woman says that she believes her 70-year-old husband may have dementia

A. Does her husband occasionally forget the name of an acquaintance or where he put his cell phone?

B. Does her husband struggle with daily tasks that he has always handled, such as paying the bills or cooking dinner?

C. Has her husband's personality changed so that he seems more self-absorbed or even selfish?

D. Does her husband erupt in anger over situations that he previously would not have found that stressful?

Answer: A

—4. A nurse, explaining the underlying mechanisms of Alzheimer's disease to a patient's family, mentions plaques and tangles. Which of the following is an accurate description of these structures?

A. Tangles are overgrown blood vessels, and plaques are areas of hardened buildup in the arteries.

B. Tangles are confused thoughts, and plaques are periods of withdrawal from social activity.

C. Tangles are protein clots inside neurons, and plaques are a mixture of dying neurons and another protein that form around damaged cells.

D. Tangles are areas in the brain with a deficiency of the neurotransmitter acetylcholine (ACh), and plaques are areas that lack the enzyme cholinesterase (ChE).

Answer: C

—5. Put the following cognitive impairments in the order in which they typically occur in the patient with Alzheimer's disease.

A. Lapses of memory about personal history and difficulty with mental arithmetic

B. Difficulty with short-term memory, such as of recently read material

- ~~C. Paranoid delusions and repetitive behavior~~
- ~~D. Difficulty in remembering home address and choosing appropriate clothing for the weather~~
- ~~E. Difficulty with moving and speaking~~

Answer: B, A, D, C, E

—6. A patient who has been diagnosed with Alzheimer's asks the nurse about medications for the condition. In particular, he has heard about Ebixa and wants to know more about it. Which of the following would be an accurate response?

- ~~A. This cholinesterase inhibitor maintain levels of acetylcholine in the synapses between neurons in the brain, enhancing neurotransmission.~~
- ~~B. This antioxidant acts as a free radical scavenger, rendering these damaging particles inert in the body and protecting brain cells from beta-amyloid plaques.~~
- ~~C. This cholesterol-lowering medication interferes with the action of the *APO-E* gene in making lipoproteins, which are implicated in Alzheimer's disease.~~
- ~~D. This NMDA antagonist is prescribed to patients with moderate to severe dementia to reduce the activity of glutamate, a neurotransmitter implicated in cell damage and death in the brain.~~

Answer: D

—7. A nurse caring for patients with dementia engages in validation therapy. Which of the following describes this therapy?

- ~~A. The nurse asks a patient's daughter to bring a family photo album, and then the nurse and daughter engage the patient in remembering the people and events in the photos.~~
- ~~B. The nurse responds with nonjudgmental affirmation to the emotional state of a patient who believes that she is in her childhood home and strangers are there who should not be.~~
- ~~C. The nurse places an easy-to-read label on the bathroom door and a large clock and calendar on the wall, and she regularly mentions the date, city, and state to patients.~~
- ~~D. The nurse ensures that patients do not become fatigued and that they are not asked to multitask.~~

Answer: A

—8. In educating a family about how best to care for an elderly relative with moderate dementia at home, a nurse might appropriately emphasize which of the following?

- ~~A. The importance of quizzing the patient every day on basic facts, such as her telephone number and address, until she gets them right.~~
- ~~B. The removal of tripping hazards, such as loose area rugs and the placement of locks on all doors and windows.~~
- ~~C. Allowing the patient to spend much of the day alone, with her memories, to accommodate her desire to withdraw from social interaction.~~
- ~~D. The importance of maintaining a lively, stimulating environment by keeping the television on, encouraging the children to "play with grandma," and having frequent dinner parties.~~

Answer: B

—9. In addressing the needs of a caregiver for an individual with dementia, the nurse would appropriately discuss all of the following except:

- ~~A. Maintain his or her own health by getting enough sleep, perhaps by taking naps during the day~~
- ~~B. Continue to get together with family and friends, either at home or outside the home if the patient can safely accompany him or her or if respite care can be arranged~~
- ~~C. Plan to be the patient's primary caregiver every day, because any disruption in routine can result in significant stress and permanent setbacks in cognition~~

~~D. See a therapist or attend a support group for caregivers to discuss the stress of dealing with a loved one who may be irrational or even abusive~~

~~Answer: C~~

~~—10. A client diagnosed with dementia of the Alzheimer's type is unable to perform activities of daily living. Which nursing intervention should take priority?~~

~~A. Reality orientation to improve cognition~~

~~B. Reminiscence therapy to improve cognition and mood~~

~~C. Timely administration of cholinesterase inhibitors to cure the disease~~

~~D. Assist with bathing and toileting~~

~~Answer: D~~

~~—11. A client diagnosed with dementia of the Alzheimer's type is experiencing impairment of cognition and judgment, and has been found wandering off the unit. Which is the priority nursing diagnosis?~~

~~A. Disturbed sleep pattern~~

~~B. Risk for injury~~

~~C. Impaired memory~~

~~D. Ineffective health maintenance~~

~~Answer: B~~

~~—12. A client diagnosed with a neurocognitive disorder is exhibiting behavioral problems daily at the change of shift. The client's behavior becomes increasingly agitated. According to the Progressively Lowered Stress Threshold (PLST) Model, which action should a nurse implement in this situation?~~

~~A. Transfer the client to a higher level of care~~

~~B. Medicate the client with PRN anxiolytic medications~~

~~C. Assess environment for triggers~~

~~D. Anticipate the behavior and begin behavior-modification techniques~~

~~Answer: C~~

~~—13. Janet, an 81-year-old woman is admitted to your unit with sudden-onset confusion, agitated behavior, disorganized thinking, and elevated temperature. Her husband reports, "she has never been like this before." Urinalysis reveals a urinary tract infection. What is the most likely explanation for Janet's condition?~~

~~A. Janice does not want to be in the hospital and is angry that the staff will not discharge her immediately.~~

~~B. Janice is experiencing delirium secondary to a urinary tract infection.~~

~~C. Janice is displaying symptoms of early-onset dementia.~~

~~D. Janice is displaying psychotic symptoms of late-onset schizophrenia.~~

~~Answer: B~~

~~—14. Discharge planning for a patient diagnosed with dementia of the Alzheimer's type and their caregiver includes all of the following except:~~

~~A. Establish simple routines at home to minimize stress~~

~~B. Referral to caregiver support group~~

~~C. Instructions regarding medications including storage of medication in a safe place, ensuring that the individual has taken the medication, and what to do if the person refuses medication.~~

~~D. Modify the medication routine to create a simple medication routine which is easy to follow~~

~~Answer: D~~

~~—15. A nurse is providing psychoeducation to family members of a patient recently admitted for delirium secondary to dehydration. Education would include which of the following?~~

~~A. “Delirium is always reversible”~~

~~B. “Medical illness and dehydration can cause delirium”~~

~~C. “Lack of rigorous exercise may lead to decreased cerebral blood flow”~~

~~D. “Delirium is a progressive condition characterized by the development of plaques and tangles”~~

~~Answer: D~~

| —16. All of the following are characteristic of delirium except:

| A. Rapid-onset of symptoms

| B. Rarely reversible

| C. Fluctuating levels of disorientation

| D. Symptoms may occur as a result of infection, dehydration, or pain.

| Answer: B

| —17. The Progressively Lowered Stress Threshold (PLST) Model

| A. Emphasizes modifying the environment to reduce stress for the patient with dementia

| B. Is associated with increased caregiver burden due

| C. Suggests that multiple stimuli is needed to minimize disruptive behaviors

| D. Encourages frequent change in caregiver to avoid boredom

| Answer: A

CHAPTER 17

Impulse Control Disorders

—1. Place the following historical developments in the understanding of impulse control disorders in chronological order:

- A. Identification of kleptomania as a disorder
- B. Identification of Internet usage disorder
- C. Identification of trichotillomania as a disorder
- D. Placement of impulse control disorders on the obsessive-compulsive spectrum

Answer: A, C, D, B

—2. Arrange the phases in the cycle of impulse response in the order in which they typically occur in an individual with an impulse control disorder, when the first phase is an increase in tension:

- A. Commitment of the act
- B. Regret, self-reproach, or guilt
- C. Pleasure, gratification, tension
- D. An increase in arousal

Answer: D, A, C, B

—3. Match the description of the impulse control disorder with the name of that disorder:

3.1. Repeatedly acting on impulses to steal items that are not needed for personal use or for their monetary value	A. Trichotillomania
3.2. Fascination with fire and repeatedly setting fires for pleasure	B. Pyromania
3.3. Pulling out one's hair until the hair loss is noticeable, resulting in short-term relief but overall significant shame and life impairment	C. Intermittent explosive disorder
3.4. Failure on at least several occasions to restrain aggressive impulses that are not a proportionate response to any stressor, resulting in harm to others or property	D. Kleptomania

Answer: 3.1 D; 3.2 B; 3.3 A; 3.4 C

—4. A nurse works with a patient who has been diagnosed with intermittent explosive disorder to structure his thinking when he feels tension building toward lashing out in an aggressive act. This nurse is engaged in which one of the following therapeutic interventions?

- A. Relaxation therapy
- B. Cognitive restructuring
- C. Play therapy
- D. Coping skills training

Answer: B

—5. When treated with psychopharmaceuticals, trichotillomania responds best to which category of medications?

- A. Selective serotonin reuptake inhibitors (SSRIs)
- B. Serotonin-norepinephrine reuptake inhibitors (SNRIs)
- C. Mood stabilizers
- D. Antipsychotics

Answer: A

—6. When a patient is prescribed risperidone for intermittent explosive disorder, the nurse must alert the patient to the potential for neuroleptic malignant syndrome. Which of the following would be accurate information to give the patient?

- A. Neuroleptic malignant syndrome is a form of cancer that may be brought on by taking an antipsychotic drug over an extended period. The patient should examine his stool and urine regularly for changes in color or the appearance of blood.
- B. Neuroleptic malignant syndrome is a failure of the bone marrow to make enough white blood cells after taking an antipsychotic drug over an extended period. It is characterized by a tendency to get infections accompanied by high fever.
- C. Neuroleptic malignant syndrome occurs within 72 hours of beginning to take an antipsychotic drug or increasing the dose. The patient should be alert to tremors and rigidity of the muscles and slurred speech.
- D. Neuroleptic malignant syndrome is potentially fatal. It usually occurs during the first 2 weeks after starting an antipsychotic drug or increasing the dose and is characterized by high fever, muscle stiffness, paranoia, sweating, and large changes in blood pressure.

Answer: D

—7. Which of the following would be appropriate therapeutic interventions to use with a patient diagnosed with intermittent explosive disorder (select all that apply)?

- A. Help the patient identify feelings that indicate tension is building up that may find a release in aggressive acts.
- B. When patient is agitated, stay with the patient to ensure her safety and that of others and keep verbal communication short and direct.
- C. Instruct the patient to ignore feelings of rising tension, as releasing these feelings as aggression results in undesirable consequences.
- D. Let the patient know that her violent feelings are unacceptable and you will not discuss them with her.
- E. Work with the patient to identify the adverse outcomes her outbursts have resulted in and to develop alternate routes for the release of tension.

Answers: A, B, E

—8. Evidence supports the possible involvement of which of these systems with kleptomania?

- A. Serotonergic

~~B. Opioid~~

~~C. Glutamatergic~~

~~D. All of the aforementioned~~

~~Answer: D~~

—9. Which of the following medications would be most likely prescribed first to treat trichotillomania?

- A. Citalopram
- B. Quetiapine
- C. Lithium
- D. Clonidine

Answer: A

—10. Which of the following would not be included in the nurse's teaching plan for a patient who is being treated for intermittent explosive disorder with lithium:

- A. Do not abruptly stop taking the medication.
- B. Drink six to eight large glasses of fluid each day.
- C. Blurred vision, severe diarrhea, nausea and vomiting, and tinnitus are all symptoms of lithium toxicity.
- D. Maintain a low-sodium diet.

Answer: D

—11. What is a major complication of trichotillomania?

- A. Fear of discovery
- B. Infected scalp
- C. The most effective treatment, Depakote, can negatively affect the liver that necessitates the need for regular labwork to be drawn up
- D. There are no known treatment options for trichotillomania

Answer: A

—12. Which of the following is true concerning impulse control disorders?

- A. Symptoms usually emerge during puberty.
- B. Impulse control disorders are often associated with symptoms due to conduct disorder, personality disorders, or of the manic episodes that occur with bipolar disorder.
- C. Most individuals with impulse control disorders do not report feelings of guilt or regret when acting on their impulses.
- D. A decrease in serotonin activity has been linked to impulse control disorders.

Answer: D

—13. Which of the following sequences describes the cycle of the impulse response in persons with impulse control disorders?

- A. Commitment of the act → pleasure, gratification, tension → impulse or desire → regret, self-approach or guilt → increased tension → increased arousal → regret, self-approach or guilt → commitment of the act
- B. Increased tension → increased arousal → commitment of the act → pleasure, gratification, tension → regret, self-reproach, or guilt
- C. Regret, self-reproach, or guilt → increased tension → commitment of the act → increased arousal → pleasure, gratification, tension
- D. Increased arousal → commitment of the act → pleasure, gratification, tension → increased tension → regret, self-reproach, or guilt

Answer: B

—14. Which of the following symptoms is the most consistent with an impulse control disorder?

~~A. A 36-year-old woman has been buying a lottery ticket every week for the past few years. Aside from a few times when she was forgetful, she never failed to buy the lottery ticket each week.~~

~~B. A 23-year-old man exhibits a pattern of pulling out strands of hair, one at a time, whenever he is under stress, despite numerous attempts to stop his behavior.~~

~~C. Within a 3-month period, a 30-year-old man sets fire to two different homes as acts of revenge.~~

~~D. A 22-year-old woman makes weekly trips to the mall in order to steal items and sell them over the Internet for a profit.~~

~~Answer: B~~

| —15. What is the primary type of pharmacological treatment used with impulse control disorders in general?

| A. Mood stabilizers such as lithium, Depakote, or carbamazepine

| B. Atypical antipsychotics such as risperidone, lurasidone, or aripiprazole

| C. Selective serotonin reuptake inhibitors such as fluoxetine or sertraline

| D. There is no primary pharmacological treatment used due to lack of efficacy

| Answer: C

CHAPTER 18

Sexual Dysfunctions, Paraphilic Disorders, and Gender Dysphoria

—1. Which of the following is an example of how scientific studies changed the medical community's view of what constitutes a sexual disorder?

- A. Varying attitudes toward polygamy in different cultures
- B. The removal of homosexuality from the *DSM* in 1973
- C. The growing legal acceptance of same-sex marriage in the United States
- D. Changing beliefs about women's sexuality throughout history

Answer: B

—2. Which of the following conditions is an example of sexual dysfunction, rather than a sexual disorder?

- A. Frotteurism
- B. Voyeurism
- C. Sexual masochism
- D. Hypoactive sexual desire disorder

Answer: D

—3. A female patient reports difficulty achieving orgasm, which causes her distress. The nurse would appropriately explore which of the following topics with the patient (select all that apply)?

- A. Medications that may be interfering with orgasm
- B. Patient's gender identity
- C. Whether the patient feels safe in an intimate context
- D. Whether the patient has a fetish
- E. Patient's feelings of security with current partner

Answers: A, C, E

—4. Which of the following is a common sexual side effect of selective-serotonin reuptake inhibitors (SSRIs)?

- A. Elevated sexual desire
- B. Premature ejaculation
- C. Inability to achieve orgasm
- D. Vaginal spasms

Answer: C

—5. A male patient expresses frustration with his inability to maintain an erection, which is most likely related to his type 2 diabetes. The nurse's most appropriate response would be which of the following?

- A. Counsel the patient about medications available to address the issue
- B. Seek to alleviate the patient's concern by explaining that compared with his diabetes, the inability to achieve erection is a minor medical problem
- C. Empathize with the patient's inability to please his partner without an erection
- D. Ask the patient whether he is heterosexual or homosexual

Answer: A

—6. Which of the following is an issue of particular concern with the interpersonal nursing process when the nurse and patient address sexual topics?

- A. The nurse must maintain appropriate boundaries despite the intimacy of the subject
- B. Transference is unlikely because the nurse is not the patient's sexual partner
- C. It is necessary to cross the nurse-patient boundary in order to discuss sexuality
- D. Debriefing with colleagues about boundary issues that may have arisen with a patient would be inappropriate because it would involve discussing sexual topics in the workplace

Answer: A

—7. A patient with a biological sex of male describes long-standing feelings of identification with the female gender. Which of the following is the most appropriate topic to explore with this patient?

- A. Transvestie fetishism
- B. Gender identity disorder
- C. Homosexuality
- D. Sexual aversion disorder

Answer: B

—8. A female patient reports that her vagina “closes” when she attempts to have sexual intercourse. Which of the following is the term for this condition?

- A. Dyspareunia
- B. Female sexual arousal disorder
- C. Sexual aversion disorder
- D. Vaginismus

Answer: D

—9. Sexual dysfunctions are conditions characterized by disruptions in the sexual response cycle of:

- A. Desire
- B. Excitement/arousal
- C. Orgasm
- D. Resolution
- E. All the aforementioned

Answer: E

—10. Some recent studies by Kort indicate that sexual orientation may be:

- A. More fluid than previously thought
- B. More rigid than previously thought
- C. Less defined by cultural norms
- D. More defined by cultural norms

Answer: A

—11. Sex therapists commonly see sexual dysfunctions as a result of:

- A. Primarily medical complication
- B. A blend of cultural, biological, relational, and belief systems conflict

~~C. A childhood history of sexual abuse~~

~~D. The natural aging process~~

~~Answer: B~~

~~—12. The population experiencing sexual dysfunction is difficult to know primarily because it is:~~

~~A. Politically incorrect~~

~~B. Underreported~~

~~C. Understudied~~

~~D. Both B and C~~

~~Answer: D~~

~~—13. Recent studies into depression and anxiety find sexual dysfunction as~~

~~A. Two separate phenomena without correlation~~

~~B. Correlated but only for those taking SSRI's~~

~~C. Inherently linked as being correlated~~

~~D. Only correlated for anxiety~~

~~Answer: C~~

~~—14. You are caring for a client who has just been started on testosterone replacement therapy. It is important to strongly advise him that~~

~~A. Not to let any female touch the application area until gel is dry~~

~~B. He is not to use any Viagra while taking testosterone~~

~~C. He should notice sexual changes within 1 to 2 days after starting~~

~~D. There are few medical risks of androgen replacement therapy~~

~~Answer: A~~

~~—15. Performing the sexual health assessment on your client often can conveniently be done during questioning of the:~~

~~A. Psychiatric status~~

~~B. Reproductive status~~

~~C. Chronic illness status~~

~~D. Marital status~~

~~Answer: B~~

~~—16. Genitopelvic pain/penetration disorder is often accompanied by severe~~

~~A. Insomnia~~

~~B. Nausea~~

~~C. Depression~~

~~D. Anxiety~~

~~Answer: D~~

CHAPTER 19

Feeding and Eating Disorders

—1. A nurse is giving a presentation about eating disorders at a local high school. A male student asks, “Isn’t that just a girls’ disease?” and a female student says, “I wish I were anorexic.” Which of the following is the most accurate response?

- A. “Eating disorders affect gay and bisexual males as well as females. About one fifth of individuals with anorexia nervosa die from the disease.”
- B. “Males, especially younger males, also suffer from eating disorders. About one fifth of individuals with anorexia nervosa die from the disease.”
- C. “Eating disorders are almost entirely a problem among females because of social messages about the desirability of thinness. About one fifth of individuals with anorexia nervosa die from the disease.”
- D. “Males, especially younger males, also suffer from eating disorders. Some women achieve weight loss while continuing to eat a large amount of food through bulimia nervosa.”

Answer: B

—2. A patient has been diagnosed as having binge-eating disorder. Which behavior is this patient likely to be addressing in therapy?

- A. Eating large amounts of food in a short period of time and then feeling deep shame about the amount eaten
- B. Eating large amounts of food in a short period of time and then vomiting to avoid gaining weight
- C. Eating large amounts of food in a short period of time and then abstaining from food for long periods of time, resulting in net weight loss
- D. Eating large amounts of food in a short period of time out of an obsessive concern over being too thin

Answer: A

—3. After talking to a teenaged female patient and interviewing her parents and best friend, the nurse has learned that the girl has stopped having her period, uses a laxative daily, and often engages in extended workouts at night after doing her homework. Which of the following would be the most appropriate term for this patient’s eating disorder?

- A. Bulimia nervosa
- B. Binge-eating disorder
- C. Anorexia, restrictive type
- D. Anorexia, binge-eating/purging type

Answer: D

—4. Which of the following factors may be implicated in a patient’s eating disorder (select all that apply)?

- A. Perfectionism
- B. Dysfunctional parent-child boundaries
- C. Enjoyment of cooking and eating good food
- D. Low self-esteem
- E. Obsessive or rigid thinking patterns

Answers: A, B, D, E

—5. The treatment for bulimia nervosa with the most evidence-based support is which of the following?

- A. Psychoeducation
- B. Nutritional counseling
- C. Cognitive behavioral therapy
- D. Selective serotonin reuptake inhibitors (SSRIs)

Answer: C

—6. During assessment, a nurse finds that a patient with a suspected eating disorder is anemic. Which of the following conditions is also a hematologic problem associated with eating disorders?

- A. Hematuria
- B. Thrombocytopenia
- C. Hypoglycemia
- D. Esophagitis

Answer: B

—7. When treating a patient with an eating disorder, a nurse might assess which of the following on a 1 to 10 scale (select all that apply)?

- A. Degree to which patient is underweight
- B. Level of support patient has from family members and peer group
- C. Patient's readiness to change behavior
- D. Patient's confidence that behavior can be changed
- E. Length of time and severity of patient's disordered relationship with food

Answers: C, D

—8. Place the following stages in the transtheoretical model of change in the order in which they typically occur.

- A. Preparation
- B. Contemplation
- C. Action
- D. Maintenance
- E. Precontemplation

Answer: E, B, A, D, C

—9. Which of the following is not considered an eating disorder/mental disorder?

- A. Pica
- B. Rumination disorder
- C. Avoidant/restrictive food intake disorder
- D. Anorexia nervosa
- E. Bulimia nervosa
- F. Obesity

Answer: F

—10. The prevalence rate for binge eating disorder varies between:

- | A. 1% and 10%
- | B. 0.7% and 6.6%
- | C. 11% and 18%
- | D. 3% and 6%
- | Answer: B

—11. Pica, the persistent mouthing or eating of nonnutritive substances, is an eating behavior that occurs most commonly in (pick all applicable):

- A. Young children
- B. Individuals with intellectual and developmental disabilities
- C. Pregnant women
- D. Males in their adolescents

Answers: A, B, C

—12. The essential feature of rumination disorder is the repeated regurgitation of food occurring after feeding or eating over a specific time frame. What is the specified time frame?

- A. 4 months
- B. 6 months
- C. 1 month
- D. 3 months

~~Answer: C~~

—13. A nurse is assessing a patient with an eating disorder for complications. Which of the following might the nurse assess?

- A. Hypertension
- B. Increased muscle strength
- C. Cold intolerance
- D. Tachycardia

Answer: C

—14. Individual factors contribute to the development of eating disorders. Which of the following might the nurse assess to help determine if there is evidence of an individual experiencing an eating disorder (pick all that apply)?

- A. Low self-esteem
- B. Body dissatisfaction
- C. Perfectionism
- D. Cognitive factors such as obsessive thoughts, inaccurate judgments, and rigid thinking patterns

Answers: A, B, C, D

—15. When a nurse is working with an individual experiencing an eating disorder, establishing a therapeutic relationship is crucial.

True-False

Answer: True

CHAPTER 20

Psychological Problems of Physically Ill Persons

—1. Critical incident debriefing is a strategy used primarily to accomplish which one of the following objectives?

- A. To evaluate how effectively the health care team handled a crisis
- B. To communicate to the media status updates on a public health crisis or other events of interest to the public
- C. To communicate to the patient health care decisions that were made while the patient was unconscious
- D. To allow nurses and other health care staff to avoid compassion fatigue by processing emotions after especially painful patient interactions

Answer: D

—2. Which of the following are the most common mental health comorbidities with physical illness?

- A. Delirium
- B. Anxiety
- C. Personality disorders
- D. Substance abuse disorders
- E. Depression

Answers: A, D, E

—3. Chronic stress contributes to the development of diabetes and asthma by which of the following mechanisms?

- A. Circulation of excessive cortisol
- B. Suppression of the hypothalamus
- C. Activation of the immune system
- D. Inactivation of neurotransmitters

Answer: A

—4. A nursing instructor asks students for the term that refers to connections among the endocrine, immune, and nervous systems. Which of the following is the correct term?

- A. Neuroimmunopsychology
- B. Immuneuropsychology
- C. Psychoneuroimmunology
- D. Psychoimmunoneurology

Answer: C

—5. Match the specific complementary or alternative therapy with its corresponding domain according to National Institute of Health's Center for Complementary and Alternative Medicine (NCCAM):

5.1. Reflexology	A. Biologically-based practices
5.2. Traditional Chinese medicine	B. Energy-biofield therapies
5.3. Meditation	C. Whole systems of healing
5.4. Herbal supplements	D. Mind-body therapies
5.5. Reiki	E. Manipulative and body-based practices

Answer: 5.1-B; 5.2-C; 5.3-D; 5.4-A; 5.5-E

—6. Place the stages of Bailey's journal of grief model in the order in which they typically occur, when the first stage is the occurrence of loss:

- A. Protest
- B. Reorganization
- C. Despair
- D. Reinvestment
- E. Searching

Answer: A, E, C, B, D

—7. When caring for a newly disabled patient who will not be able to return to his previous employment, the nurse can most appropriately respond to his expressed emotions by:

- A. Suggesting that the patient talk to his family and friends about those feelings
- B. Giving the patient information about unemployment and disability benefits
- C. Performing the medical aspects of care as effectively as possible to reassure the patient that he is receiving excellent treatment
- D. Paraphrase the patient's concerns and reflect them back at the patient, showing understanding

Answer: D

—8. A nurse might conclude that a patient who has lost functionality due to congestive heart failure is engaged in normal grieving when the patient reports which of the following?

- A. Patient has dreams in which a new medical treatment reverses the loss of cardiac function
- B. Patient sometimes focuses intensely on the loss and other times is not preoccupied by it
- C. Patient does not express anger at the condition
- D. Patient cannot sleep at night but dozes off during the day

Answer: B

—9. When a nurse delivers information to a patient that is likely to be upsetting, he may use the SPIKES protocol. Which of the following is an example of using this protocol?

- A. Do not treat the patient as though she is stupid; assume she understands what you have said.
- B. Make sure to communicate all the information that the patient needs to know; the patient can ask for clarification of anything she does not remember later.

C. Ask the patient what she knows about her situation and whether she would like to know more; indicate that further information will be bad news.

D. Begin the conversation by stating the problem and laying out a plan for dealing with it; then go into more detail about the problem.

Answer: C

—10. A nurse supervisor discusses the health care facility's protocol for providing hospice care. Which of the following most accurately describes the goals of hospice care?

- A. The focus is on the process of dying and facing death while withholding further medical care.
- B. The focus is on the process of dying supported by adequate pain control and the companionship of loved ones.
- C. The focus is on saving money for the health care provider and patient's family by withholding treatments that are unlikely to be effective.
- D. The focus is on placing the patient in a legal status with a valid living will and durable power of attorney to avoid liability on the patient's death.

Answer: B

—11. All the following are true about suffering except:

- A. Suffering is a pathological construct.
- B. The nurse is in an ideal position to reduce the experience of suffering in patients.
- C. Exposure to the suffering of others can impact the health of the nurse.
- D. Compassion fatigue is an occupational hazard for nurses.

Answer: A

—12. Grief

- A. Is reserved for the experience of end-of life
- B. Is experienced in an orderly progression of stages
- C. Does not impact how the patient experiences an illness
- D. Accompanies the experience of all physical illnesses

Answer: D

—13. Pain

- A. Management is not a psychosocial intervention
- B. Is associated with increased mortality
- C. Is so subjective that nurses cannot accept the patient's report of it at face value
- D. Does not affect circulating cortisol levels to any statistically significant degree

Answer: B

—14. The impact of stress

- A. In childhood on developing chronic disease later in life has not been established
- B. Can be moderated with the complementary use of mind/body techniques
- C. Cannot be altered because autonomic reactions are not under voluntary control
- D. On inflammation associated with chronic disease has not been demonstrated

Answer: B

—15. Complementary and integrative health techniques

- A. Should be discouraged due to negligible research evidence for their effectiveness
- B. Cannot be used with conventional Western practices as they tend to neutralize one another
- C. Are well within the nurse's scope of practice
- D. Typically increase circulating serum cortisol levels

| Answer: C

~~—16. Conversations about death and dying~~

~~A. Are better left up to the physician~~

~~B. Tend to erode hope in the patient so are better left to the last minute~~

~~C. Tend to help the patient find meaning in the experience, reduce isolation, and increase a sense of self-empowerment in the face of what is inevitable~~

~~D. Create more stress for the patient and nurse than reduce it~~

~~Answer: C~~

~~—17. Buckman's SPIKES Protocol~~

~~A. Can only be used by board-certified physicians~~

~~B. Requires hour-long sessions with patients if done properly~~

~~C. Ensures that bad news is delivered in the most therapeutic way possible~~

~~D. Is the protocol of choice for delivering complementary and integrative therapies~~

~~Answer: C~~

~~—18. The following are true about body image and stigma for patients experiencing physical alterations in appearance or function due to physical illness EXCEPT:~~

~~A. There really is nothing that nurses can do to assist patients with body image; patients just have to learn to live with whatever happens to them.~~

~~B. Nurses can use integrative mind/body techniques to help patients relate to the affected body part in such a way as to reintegrate it into a unified body image.~~

~~C. Addressing body image changes usually involves attention to grief work.~~

~~D. Expressing anger toward an impaired part of the body is a normal part of healing.~~

~~Answer: A~~

CHAPTER 21

Working With Children

—1. Place the stages of Piaget's theory of psychomotor development in the order they occur in typical children.

- A. Preoperational
- B. Sensorimotor
- C. Concrete operational
- D. Formal operational

Answers: B, A, C, D

—2. A psychologist describes a 10-year-old child as struggling with industry versus inferiority in terms of Erikson's stages of development. What difficulties might one expect this child to have? (select all that apply)

- A. Not completing homework for school unless a parent sits with him
- B. Struggling to withstand peer pressure and taking on different identities in different groups
- C. Feeling utterly dependent on caretakers and being unable to entertain himself alone
- D. Being preoccupied with death and a feeling of futility
- E. Attaching no significance to rewards such as praise or allowance money in return for getting good grades or completing chores

Answers: A, E

—3. An advanced practice nurse notes that an 8-year-old is developmentally appropriate in terms of Sullivan's stages of development. Which of the following is a characteristic task of this age?

- A. Forming opposite-sex relationships
- B. Learning to delay gratification
- C. Forming peer relationships
- D. Developing self-identity

Answer: C

—4. The causes of autism, which are diverse are well understood due to the many studies that have been conducted.

True-False

Answer: False

—5. A mother brings her 8-year-old son to the clinic because she is concerned about his development. Specifically, he gets teased a lot at school because he only wants to talk to his classmates about airplanes. He also throws tantrums over any perceived disruption to his focus on a task or his routine. Which of the following would be the most appropriate diagnosis to explore?

- A. Autism
- B. Asperger's disorder
- C. Conduct disorder
- D. Attention deficit disorder

Answer: B

—6. In differentiating oppositional defiant disorder (ODD) from conduct disorder (CD), the mental health care provider considers which of the following?

- A. The child's degree of impulse control

- B. Whether the child talks excessively and interrupts others
- C. Whether the child hurts property, animals, or people
- D. The child's tendency to resist adult authority and express anger toward adults

Answer: C

—7. Which of the following is a key difference between how depression appears in children versus adults?

- A. The *DSM* criteria used to diagnose depression
- B. The possibility that the patient with depression may commit suicide
- C. The causal role of family history of depression and stressful events
- D. The way the patient expresses feelings of hopelessness and despair

Answer: D

—8. A 14-year-old saw her brother shot and killed outside their father's home and since then has complained of stomachaches and headaches and has been truant from school. The nurse would most appropriately explore which of the following in the therapeutic relationship with this patient?

- A. Psychosomatic illness
- B. Oppositional defiant disorder (ODD)
- C. Depression
- D. Posttraumatic stress disorder (PTSD)

Answer: D

—9. Parents ask a nurse why their child will be engaged in play therapy, as "our child can play at home." Which of the following is the most appropriate response?

- A. "Play therapy is guided by the therapist, helping the child to use specific toys to work through specific issues."
- B. "Play therapy involves the child and parents in a psychodynamic situation that is observed by the therapist."
- C. "Play therapy gives the child complete freedom to express emotions the child cannot express verbally so that the therapist can help the child work through them."
- D. "Play therapy encourages the child to verbalize thoughts and feelings as the therapist asks the child what his or her imaginative play means."

Answer: C

—10. A nurse reviews an 11-year-old's intake documentation and sees that the child has been prescribed methylphenidate. Which of the following is a valid reason this medication may have been prescribed?

- A. Central nervous system stimulants treat attention deficit/hyperactivity disorder (ADHD) in children.
- B. Central nervous system stimulants treat depression in children.
- C. Selective serotonin reuptake inhibitors (SSRIs) treat ADHD in children.
- D. Selective serotonin reuptake inhibitors (SSRIs) treat depression in children.

Answer: A

—11. The highlighted importance of parent/family input in diagnosing mental disorders in children most closely follows which Quality and Safety Education for Nurses (QSEN) standard?

- A. Quality improvement
- B. Informatics
- C. Safety

~~D. Patient-centered care~~

~~Answer: D~~

—12. What is the most common psychopharmacological treatment for ADHD?

- A. Antidepressants
- B. Central nervous stimulants
- C. Antipsychotics
- D. Benzodiazepines

Answer: B

—13. Autism spectrum disorder differs from schizophrenia in which of the following ways?

- A. Schizophrenia occurs after a period of normal development, whereas autism is likely present from birth.
- B. Autism is associated with hallucinations, whereas schizophrenia is not.
- C. Both A and B.
- D. None of the above.

Answer: A

—14. To address concerns about overdiagnosis of childhood bipolar disorder, which diagnosis is now used for children aged 12 years and under with persistent irritability and frequent episodes of behavioral dyscontrol?

- A. Oppositional defiant disorder (ODD)
- B. Conduct disorder (CD)
- C. Disruptive mood dysregulation disorder (DMDD)
- D. Pica

Answer: C

—15. Using the QSEN standard of patient-centered care, which therapeutic communication techniques can help to demonstrate understanding of pain and suffering?

- A. Validation and empathy
- B. Justification and blaming
- C. Medical jargon and explanation
- D. All of the aforementioned

Answer: A

—16. Children with PTSD often exhibit symptoms differently than adults. Rather than verbally, children may display which of the following behaviors?

- A. Eating substances with no nutritional value
- B. Repetitively crashing cars together following a car accident
- C. Jumping from one activity to another
- D. Regurgitating food following a meal

Answer: B

—17. Eating or feeding disturbances that result in failure to meet appropriate nutritional and energy needs, and are accompanied by which of the following, indicate a need for psychological intervention?

- A. Significant weight loss
- B. Malnutrition/dehydration
- C. Dependence on supplements or enteral feeding

~~D. All of the aforementioned~~

Answer: D

—18. The most appropriate therapeutic approach for a 3-year-old child would be like?

~~A. Cognitive behavioral therapy~~

~~B. Psychoanalysis~~

~~C. Behavioral therapy (i.e., token/reward system)~~

~~D. Play therapy~~

Answer: D

—19. A nurse is observing the behavior of an 18-month-old child. The child is playing with a toy that involves placing different shaped blocks into the appropriately shaped opening. The child is attempting to place a round block into the round hole. The nurse interprets this as indicating which of the following?

~~A. Circular reaction~~

~~B. Object permanence~~

~~C. Symbolic play~~

~~D. Magical thinking~~

Answer: B

—20. The following tasks reflect the stages of growth and development as identified by Sullivan. Place them in the order in which they would occur beginning with infancy.

~~A. Self-identity development (6. Late adolescence)~~

~~B. Delayed gratification (2. Childhood)~~

~~C. Same-sex relationships (4. Pre-adolescence)~~

~~D. Oral gratification (1. Infancy)~~

~~E. Opposite-sex relationships (5. Early adolescence)~~

~~F. Peer relationships (3. Juvenile)~~

Answer: D, B, F, C, E, A

—21. The nurse is working with the parents of a child with a mental health problem in developing a system of rewards and punishments for the child's behavior. The nurse is demonstrating integration of which theorist?

~~A. Freud~~

~~B. Pavlov~~

~~C. Skinner~~

~~D. Erikson~~

Answer: B

—22. A nurse is interviewing a child diagnosed with a conduct disorder. Which of the following would the nurse expect to assess?

~~A. Repetitive, stereotypical behaviors~~

~~B. Difficulty organizing tasks~~

~~C. Lack of follow-through with directions~~

~~D. Bullying behaviors~~

Answer: D

—23. A child is diagnosed with ADHD. When reviewing the child's history, which of the following would the nurse expect to find?

- A. Exposure to a traumatic event
- B. Difficulty engaging in quiet leisure activities
- C. Frequent losses of temper
- D. Previous diagnosis of oppositional defiant disorder

Answer: B

—24. A group of nursing students is reviewing information about adjustment disorders in children. The students demonstrate a need for additional study when they identify which of the following as a possible stressor?

- A. Witness to the death of a parent
- B. Moving away of a close friend
- C. Parental divorce
- D. Bullying by a classmate

Answer: A

CHAPTER 22

Mental Health Concerns Regarding Adolescents

—1. When treating a 16-year-old patient, the nurse should keep in mind which of the following as being characteristic conflicts of adolescence (select all that apply)?

- A. Identity crisis due to a rapidly changing body and brain
- B. Struggles with self-esteem due to body changes that result from puberty
- C. An innate tendency toward high-risk and illegal behaviors such as drug abuse
- D. A biological predisposition to laziness and antisocial behavior if not carefully monitored
- E. Concerns over peer relationships, which are becoming more important

Answers: A, B, E

—2. A nurse is establishing a therapeutic relationship with an adolescent. Which of the following is an appropriate element of this process?

- A. Meet with the patient and the parents together because the adolescent will feel more secure with the parents present
- B. If the patient wants to discuss friends and peer relationships at school and elsewhere, steer the conversation back to the adolescent, as he or she is the focal point of therapy
- C. Establish authority as a health care professional and set clear guidelines about the process and goals of therapy, because adolescents need a firm hand
- D. Meet with the patient individually, because adolescents may struggle with dysfunctional family relationships and/or fear of revealing personal information to family members

Answer: D

—3. Adolescents are spending an increasing amount of time on the computer, whether to do homework, interact socially, or play games. Which of the following are valid mental health concerns related to adolescent computer use (select all that apply)?

- A. Adolescents who participate extensively in online social networks often feel isolated and depressed
- B. Adolescents may not take appropriate precautions to protect privacy and security online and may be targeted by predators
- C. Adolescents may be targeted by cyber bullying, which has the potential to be a 24/7 presence in the victim's life
- D. Adolescents have the ability to engage in conversations with their friends online that their parents, without the same computer expertise, are not privy to
- E. Adolescents who spend extensive time on the computer tend not to succeed academically

Answers: B, C

—4. A nurse notices small scars, fresh cuts, and burn marks on the upper arms of a 15-year-old girl. Which of the following is a valid topic to explore initially with this patient?

- A. Suicidal ideation
- B. Self-harm without suicidal intent
- C. Attention-seeking behavior
- D. Posttraumatic stress disorder (PTSD)

Answer: B

—5. All of the following are warning signs of potential suicide in adolescents and warrant assessment for acuity of risk and ongoing depression except:

- A. Engaging in high-risk, impulsive behavior such as driving a car at high speed
- B. Using alcohol
- C. Withdrawing from friends and family
- D. Not brushing teeth or wearing clean clothes

Answer: A

—6.— A nurse is giving a presentation at a PTA meeting about adolescent substance abuse. Which of the following should be noted as the most frequently abused substance among adolescents.

- A. Marijuana
- B. Cocaine
- C. Ecstasy and other “club” drugs
- D. Alcohol

Answer: D

—7.— Which of the following could be one of the primary goals of cognitive behavioral therapy (CBT) with an adolescent?

- A. Replace negative and maladaptive thoughts, feelings, and behaviors that are at the root of depression with positive ones, with a focus on putting new behaviors into practice.
- B. Address the causes of social phobia by teaching the adolescent social skills in a group of peers.
- C. Prevent suicide by encouraging the adolescent to express feelings through play and engaging in reflective listening that validates the adolescent’s emotions.
- D. Educate parents and other caregivers about the developmental conflicts and milestones of adolescents and teach them how to help the adolescent navigate these successfully.

Answer: A

—8.— When considering whether to admit an adolescent to an inpatient setting, which of the following is a valid consideration?

- A. The patient may meet other young people with similar problems and feel less stigma and therefore have less motivation to get better.
- B. The patient will be separated from the family, which is always the best source of support for an adolescent with mental health problems.
- C. The patient may be exposed to a new peer group and begin to copy their behaviors, which may include self-harm and noncompliance.
- D. The patient will be separated from his or her usual support systems and may therefore develop more autonomy, better social skills, and higher self-esteem.

Answer: C

—9.— An adolescent patient withdraws from the therapeutic relationship with a nurse and expresses anger toward the nurse. Which of the following evaluative questions could the nurse most usefully ask herself?

- A. How can I make this patient see that the only way he will get better is by working with me?
- B. How have our interactions looked from the patient’s perspective, and how could I change the dynamic?
- C. How can I work through this interruption to our therapeutic relationship without having to discuss it with my colleagues?
- D. How can I address this patient’s excessive sense of self that is leading him to challenge me?

Answer: B

—

—10. A nurse is trying to identify if an adolescent is at risk of suicide. Which of the following should they do (select all that apply)?

- A. Not bring it up for fear they will become more suicidal
- B. Ask them directly if they are feeling suicidal
- C. Ascertain if they have a plan
- D. Question them about previous attempts

Answer: B, C, D

—

—11. Inpatient care is often offered to adolescents. Why might it be of benefit (select all that apply)?

- A. It provides an opportunity for ongoing assessment
- B. It allows adolescents to copy the behavior of other adolescents
- C. It allows the opportunity to rely on services
- D. It provides an opportunity for close monitoring

Answer: A, C, D

—12. It is recommended that a nurse adopt a person-centered approach when dealing with patients. Which of the following should this include (select all that apply)?

- A. The nurse making decisions based on what he or she feels is in the best interest of the patient
- B. Examining a patient's values and beliefs
- C. Understanding that an adolescent is a minor and decisions need to be made for him or her
- D. Affording them the opportunity to be part of the decision-making process

Answer: B, D

—13. Adolescence is characterized by a period of fluctuation and change. Which of the following are typically seen during the adolescence period (select all that apply)?

- A. Searching for self-identity
- B. Heavy use of alcohol and drugs
- C. Changes in confidence and self-esteem
- D. Depression and hopelessness

Answer: A, B, C

—14. A nurse is working with an adolescent with a diagnosis of ADHD to develop behavioral strategies. Should he or she (select all that apply):

- A. Explore the antecedents to the behavior with the adolescent and his or her family?
- B. Identify what behavior would be more appropriate in the circumstance?
- C. Identify punishments for inappropriate behavior?
- D. Identify rewards for appropriate behaviors?

Answer: All of the above

CHAPTER 23

Issues Specific to the Elderly

—1. A psychiatrist-mental health nurse is giving a presentation at a community center about mental health and the elderly. Which of the following would not be an appropriate topic to address?

- A. The elderly are increasing as a proportion of the U.S. population.
- B. The loss of independence an elderly person experiences as a result of physical conditions can result in mental health issues, which also need to be addressed.
- C. The elderly tend to complain more than younger people about how they feel and to exaggerate symptoms of mental illness.
- D. The elderly person's family relationships are a key consideration when developing a therapeutic plan.

Answer: C

—2. Match the names of the components of Medicare to their descriptions.

2.1. Provides reimbursement for drug expenses.	A. Medicare Part A
2.2. Provides reimbursement for outpatient services, including therapy and counseling.	B. Medicare Part B
2.3. Provides reimbursement for hospital care.	C. Medicare Part C
2.4. This is not a component of Medicare.	D. Medicare Part D

Answer: 2.1-D; 2.2-B; 2.3-A; 2.4-C

—3. An elderly patient reports having trouble sleeping, and physical causes have been ruled out. Which of the following may be a behavioral cause of the problem?

- A. Drinking less coffee than previously
- B. Worrying about not being able to sleep
- C. Setting the alarm clock for too early in the morning
- D. Avoiding sleeping medications

Answer: B

—4. A nurse is facilitating a group of elderly individuals in a discussion of potentially stressful changes associated with aging. Which of the following responses should the nurse expect (select all that apply)?

- A. Providing care for an aging spouse
- B. Dealing with reduced vision and/or hearing
- C. Getting by on less money
- D. No longer being interested in hobbies
- E. Dealing with pain from a chronic illness

Answers: A, B, C, E

—5. An elderly patient reports that she has lost most of her mobility due to arthritis and declining eyesight and that her best friend recently moved to live with family in another state. The nurse might most appropriately explore which of the following with the patient?

- A. Loneliness and risk of falls
- B. Family relationships and identification of potential caregivers
- C. Available services for disabled individuals
- D. Loneliness and potential depression

Answer: D

—6. Match each of the following interventions for abuse that disproportionately affect the elderly with the corresponding category of abuse.

6.1. Assess for more rapid decline in physical and/or mental health than one would expect; collect information on patient's family situation with alertness to a dependent family member living with the patient.	A. Physical abuse
6.2. Assess for lack of personal hygiene, dehydration, and unhealed lesions in a patient requiring a high level of care.	B. Psychological abuse
6.3. Assess for refusal of assistance, which may be expressed as fierce independence, and indicators of hoarding, poor nutrition, and/or personal hygiene.	C. Self-neglect
6.4. Assess for bruises and scars and/or a record of frequent trips to the emergency department for "accidents"; collect information on patient's family situation with alertness to a dependent family member living with the patient.	D. Neglect

Answer: 6.1 B; 6.2 D; 6.3 C; 6.4 A

—7. A nurse is assessing an elderly patient who has diminished cognition. Which of the following would the nurse use to distinguish depression from dementia or delirium?

- A. In depression, cognitive changes are usually associated with specific activities rather than with global functioning.
- B. In depression, sleep patterns are disturbed and usually vary according to no pattern.
- C. Depression can be assessed via the Folstein Mini Mental Exam with Clock Drawing.
- D. Depression is more often brought about by infections or changes to medication rather than by stress or loneliness.

Answer: A

—8. An elderly patient who has been diagnosed with generalized anxiety disorder (GAD) is being treated with a psychopharmaceutical agent. Which of the following medications is most effectively used to treat GAD in the elderly?

- A. Escitalopram and paroxetine (SSRIs) and duloxetine and venlafaxine (SNRIs)
- B. Lorazepam and oxazepam (benzodiazepines)
- C. Buspirone
- D. Diazepam and clonazepam (benzodiazepines)

| ~~Answer: A~~

—9. A nursing instructor asks students to describe the problem of polypharmacy in the elderly. Which of the following is an appropriate response?

A. Polypharmacy results when more than one pharmacy provides a generic medication to a patient, resulting in doses of different brands and slightly different action.

B. Polypharmacy refers to mixing prescription and over-the-counter drugs, even if under the supervision of a physician.

C. Polypharmacy often occurs when a patient does not get relief from one prescription and sees another health care provider to get a different prescription or takes over-the-counter herbal supplements.

D. Polypharmacy describes a situation in which the patient is taking prescription drugs and abusing alcohol or an illicit substance.

~~Answer: C~~

—10. All of the following are potential barriers to accessing mental health care of particular concern with a nurse addressing the needs of an elderly patient, except:

A. Limited mobility or residence in a rural area

B. Ineffectiveness of outpatient services such as telepsychology and mobile clinics

C. Cultural or generational stigma against seeking mental health care

D. Relatively limited reimbursement for mental health services by Medicare and other insurance programs

~~Answer: B~~

—11. Which information obtained by the home health nurse when making a visit to an 88-year-old with mild forgetfulness is of the most concern?

A. The patient's son uses a marked pillbox to set up the patient's medications weekly.

B. The patient has lost 10 pounds (4.5 kg) during the last month.

C. The patient is cared for by a daughter during the day and stays with a son at night.

D. The patient tells the nurse that a close friend recently died.

~~Answer: B~~

—12. In reviewing changes in the older adult, the nurse recognizes that which of the following statements related to cognitive functioning in the older client is true?

A. Delirium is usually easily distinguished from irreversible dementia.

B. Therapeutic drug intoxication is a common cause of senile dementia.

C. Reversible systemic disorders are often implicated as a cause of delirium.

D. Cognitive deterioration is an inevitable outcome of the human aging process.

~~Answer: C~~

—13. Which of the following statements accurately reflects data that the nurse should use in planning care to meet the needs of the older adult?

A. Fifty percent of older adults have two chronic health problems.

B. Cancer is the most common cause of death among older adults.

C. Nutritional needs for both younger and older adults are essentially the same.

D. Adults older than 65 years of age are the greatest users of prescription medications.

~~Answer: D~~

~~—14. Which of the following statements, made by the daughter of an older adult client concerning bringing her mother home to live with her family, presents the greatest concern for the nurse?~~

- ~~A. “If this doesn’t work out, she can always go to live with my sister.”~~
- ~~B. “I don’t think she will react very well to me making decisions for her.”~~
- ~~C. “I’m afraid that mom will be depressed and miss her home.”~~
- ~~D. “My children will just have to adjust to having their grandmother with us.”~~

~~Answer: B~~

~~—15. Which of the following statements made by an older adult client poses the greatest concern for the nurse conducting an assessment regarding the client’s adjustment to the aging process?~~

- ~~A. “I use to enjoy dancing and jogging so much, but now I have arthritis in my knees so that it’s hard to even walk.”~~
- ~~B. “I’ve given my grandchildren money for college so they can live a better life than I had.”~~
- ~~C. “Growing old certainly presents all sorts of challenges. I wish I knew then what I know now.”~~
- ~~D. “As I age I’ve found it’s harder to do the things I love doing, but I guess it will all be over soon enough.”~~

~~Answer: D~~

~~—16. Of the following options, which is the greatest barrier to providing quality health care to the older adult client?~~

- ~~A. Poor client compliance resulting from generalized diminished capacity~~
- ~~B. Inadequate health insurance coverage for the group as a whole~~
- ~~C. Insufficient research to provide a basis for effective geriatric health care~~
- ~~D. Preconceived assumptions regarding the lifestyles and attitudes of this group~~

~~Answer: D~~

~~—17. A nurse caring for older adults in an assistive living facility recognizes that a client’s quality of life needs are best determined by:~~

- ~~A. Excellent physical, social, and emotional nursing assessments~~
- ~~B. A working knowledge of this age group’s developmental needs~~
- ~~C. A therapeutic nurse–client relationship that facilitates communication~~
- ~~D. The client’s need for complete physical, emotional, and cognitive care~~

~~Answer: C~~

~~—18. The three common conditions affecting cognition in the older adults are:~~

- ~~A. Stroke, myocardial infarction (MI), cancer~~
- ~~B. Cancer, Alzheimer’s disease, stroke~~
- ~~C. Delirium, depression, dementia~~
- ~~D. Blindness, hearing loss, stroke~~

~~Answer: C~~

~~—19. When caring for the older adult, it is important to:~~

- ~~A. Repeat oneself often because older adults are forgetful~~
- ~~B. Treat the client as an individual with a unique history of his or her own~~
- ~~C. Be aware that older adults are no longer interested in sex~~
- ~~D. Disregard the older adult’s experiences because older people are too old-fashioned to be of value today~~

~~Answer: B~~

~~—20. When administering a mental status examination to a patient with delirium, the nurse should~~

- ~~A. Give the examination when the patient is well rested~~
- ~~B. Choose a place without distracting environmental stimuli~~
- ~~C. Reorient the patient as needed during the examination~~
- ~~D. Medicate the patient first to reduce anxiety~~

~~Answer: B~~

~~—21. Of the following, which describes dementia?~~

- ~~A. Quick onset, irreversible~~
- ~~B. Slow onset, chronic~~
- ~~C. Acute onset, reversible~~
- ~~D. Progressive, terminal~~

~~Answer: B~~

~~—22. A 76-year-old adult female is brought to a neighborhood client after being found wandering around the local park. The client appears disheveled and reports being hungry. Which of the following assessment and interview findings would cause the nurse to suspect elder abuse (select all that apply)?~~

- ~~A. Falls asleep in the examination room~~
- ~~B. Repeatedly states, “Don’t hurt me”~~
- ~~C. Chafing around wrists and ankles~~
- ~~D. Bruises in various stages of healing~~

~~Answers: B, C, D~~

~~—23. The most common affective or mood disorder of old age is~~

- ~~A. Dementia~~
- ~~B. Depression~~
- ~~C. Delirium~~
- ~~D. Alzheimer’s~~

~~Answer: B~~

~~—24. An elderly woman’s husband died. When her brother arrives for the funeral, he notices her short-term memory problems and occasional disorientation. A few weeks later, she calls him to say that her husband just died. She says, “I didn’t know he was so sick. Why did he die now?” She also complains of not sleeping, urinary frequency and burning, and seeing rats in the kitchen. A home care nurse is sent to evaluate her situation and finds the woman reclusive and passive, but pleasant. The nurse calls the woman’s primary care physician to discuss the client’s situation and background, and give his assessment and recommendations. The nurse concludes that the woman:~~

- ~~A. Is experiencing the onset of Alzheimer’s disease~~
- ~~B. Is having trouble adjusting to living alone without her husband~~
- ~~C. Is having delayed grieving related to her Alzheimer’s disease~~
- ~~D. Is experiencing delirium and a urinary tract infection~~

~~Answer: D~~

~~—25. Transfer data for a client brought by ambulance to the hospital’s psychiatric unit from a nursing home indicate that the client has become increasingly confused and disoriented. The client’s behavior is found to be the result of~~

cerebral arteriosclerosis. Which of the following behaviors of the nursing staff should positively influence the client's behavior (select all that apply)?

- A. Limiting the client's choices
- B. Accepting the client as he is
- C. Allowing the client to do as he wishes
- D. Acting nonchalantly
- E. Explaining to the client what he needs to do step by step

Answers: A, B, E

—26. The nurse observes a client in a group who is reminiscing about his past. Which effect should the nurse expect reminiscing to have on the client's functioning in the hospital?

- A. Increase the client's confusion and disorientation
- B. Cause the client to become sad
- C. Decrease the client's feelings of isolation and loneliness
- D. Keep the client from participating in therapeutic activities

Answer: C

—27. A 69-year-old client is admitted and diagnosed with delirium. Later in the day, he tries to get out of the locked unit. He yells, “Unlock this door. I’ve got to go see my doctor. I just can’t miss my monthly Friday appointment.” Which of the following responses by the nurse is most appropriate?

A. “Please come away from the door. I’ll show you your room.”

B. “It’s Tuesday and you are in the hospital. I’m Anne, a nurse.”

C. “The door is locked to keep you from getting lost.”

D. “I want you to come eat your lunch before you go to the doctor.”

Answer: B

CHAPTER 24

Victims and Victimizer

—1. Match the examples of various kinds of abuse with the corresponding types of abuse.

1.1. Withholding food and medication	A. Economic
1.2. Smashing a family heirloom of the victim	B. Sexual
1.3. Keeping the family bank account in one spouse's name only	C. Physical
1.4. Engaging in unwanted rubbing of the genitals	D. Emotional

Answer: 2.1 C; 2.2 D; 2.3 A; 2.4 B

—2. A nursing instructor is discussing domestic violence. A student could most accurately say which of the following about the abuse of children in the family home?

A. Children often tell an adult when they are being abused.

B. Regularly withholding food from a child is not abuse when done to punish the child.

C. Abuse most often occurs between the ages of 3 and 5 years, but can have implications for later substance abuse and other health problems.

D. Because mothers usually perform most child care responsibilities, they are also most often the abusers of children.

Answer: C

—3. Place the following stages in the cycle of abuse in the order in which they are most often thought to occur, where the cycle begins in the normal stage.

A. Guilt

B. Rationalize

C. Setup

D. Planning

E. Fantasy

F. Abuse

Answer: E, D, C, F, A, B

—4. A patient in an abusive domestic relationship describes her partner as being very solicitous and apologetic after pushing her into a wall. This behavior corresponds to which stage in Walker's three-stage cycle of violence?

A. Honeymoon period

B. Tension building

C. Battering incident

D. Repentance and change

Answer: A

—5. A patient is afraid to upset his wife because when he does, she screams profanity and criticism at their son. The nurse could point to which section of the power and control wheel to explain that this behavior constitutes abuse?

- A. Using intimidation
- B. Using emotional abuse
- C. Using children
- D. Using coercion and threats

Answer: C

—6. A school nurse suspects that a very shy child who is frequently absent and complains often of stomachaches may be a victim of abuse. Which of the following would be an appropriate action to take?

- A. Call the parents and ask them to come to the school to answer some questions.
- B. Examine the child, paying attention to nonverbal indicators of abuse.
- C. Talk to the child's primary teacher, asking that the child receive special treatment.
- D. Talk to the child's brother, who also attends the school, to try to find out whether abuse is occurring at home.

Answer: B

—7. When a nurse is counseling a victim of intimate partner abuse, the victim is most likely to express which of the following?

- A. The abuser was never caring or loving at any point in the relationship.
- B. The victim has an extensive support network of family and friends.
- C. The victim welcomes criticism of the abuser and is happy to hear validation of the judgment that this individual is abusive.
- D. The victim feels a sense of failure and has low self-worth for having been unable to prevent the abuse.

Answer: D

—8. When working with a patient who is the victim of ongoing intimate partner abuse, the nurse should be aware that which of the following events most increase the risk to the victim (select all that apply)?

- A. Developing a safety plan to use until ready to leave the relationship
- B. Becoming pregnant and revealing the pregnancy to the abuser
- C. Secretly making a plan to leave the relationship
- D. Having been separated from the abuser for an extended period of time
- E. Leaving the abuser

Answers: B, E

—9. A nurse is helping a victim of domestic abuse develop a plan to leave the relationship. Which of the following is an important component of that plan?

- A. Take as much of the abuser's money or property as possible to show him you are serious.
- B. Do not determine a place to go because if you do not know where you are going, he would not know either.
- C. Make copies of important legal and identity documents as well as computer files with phone numbers and financial information.
- D. Know that once you leave the relationship, you will feel better and no longer need mental health services.

Answer: C

—10. A nurse working with a woman who states her husband often hits her when he has had too much to drink, best serves her patient by:

- A. Reporting the abuse to legal authorities and advising the woman to leave the abuser.
- B. Advising the woman to suggest her husband attend a 12-step program.
- C. Providing the woman with information related to abuse, available resources, and safety planning.
- D. Suggesting the woman participate in couples therapy to address the issue.

Answer: C

RATIONALE: Clinicians should not report intimate partner violence (IPV) to authorities unless injuries were life-threatening, or inflicted using a gun or a knife. In addition, clinicians should respect the woman's wishes if she chooses to stay with the abuser. Advising the woman to have her husband attend a 12-step program or participating in couple's therapy does not address the issue of abuse. The only correct answer is to provide information about abuse, resources, and the need for safety planning.

—11. The nurse working with a patient suspected to be the victim of elder abuse should:

- A. Avoid directly asking the patient about potential abuse to not upset them.
- B. Immediately contact adult protective services to report the case.
- C. Realize that physical and cognitive impairment increase the risk of abuse.
- D. Inform the elder that they must file a police report to bring charges against the abuser.

Answer: C

RATIONALE: Nurses working with patients who may be victims of elder abuse should be able to recognize the risk factors to improve their ability to accurately assess the patient. It is not appropriate to avoid directly questioning the patient. Each jurisdiction also has specific regulations related to elder abuse; therefore, contacting adult protective service may not be warranted. Finally, the elder, depending on their circumstances and functional level, may be unwilling to involve the police and the nurse's response may inhibit the elder from revealing further concerns.

—12. Children at highest risk of death due to abuse are:

- A. Teenagers
- B. Middle school children
- C. Elementary school children
- D. Infants and toddlers

Answer: D

RATIONALE: Although children at all ages may be subjected to abuse, the highest incidence of death occurs in infancy and early childhood when children are more likely to experience abusive head trauma.

—13. The appropriate nursing response to a patient's daughter who has admitted that at times she has become frustrated with her mother and may have "been a little rough" when providing care:

- A. Assess for possible care giver strain and explore available resources.
- B. Sternly advise the daughter that this is elder abuse and must be reported.
- C. Report the case to adult protective services and request an investigation.
- D. Contact social services to arrange an alternate placement for the mother.

Answer: A

RATIONALE: The nurse should be aware of the implications of caregiver strain and the risks it prevents for elder abuse and neglect. Providing resources or assisting in reducing the strain may reduce the risk of elder abuse and neglect and avoid disruption in the elder's living situation. Advising the daughter that the case must be reported or actually reporting the case will not reduce the strain and depending on the cognitive and functional level of the

patient may result in alienating both the patient and the family. Removing the patient from the home may create a greater hardship for the patient.

~~—14. Those who typically contribute to elderly neglect include (boldface all that apply):~~

- ~~A. Family members and caregivers~~
- ~~B. Staff members at residential facilities~~
- ~~C. The elder patient~~
- ~~D. Scam artists or confidence artists~~

~~Answer: D~~

~~RATIONALE: Although all those listed contribute to patient maltreatment, scam artists and confidence artists are involved in elder financial abuse, not neglect.~~

~~—15. The nurse working with a victim of IPV who states she has been subjected to both physical and sexual abuse and is ready to terminate the relationship should:~~

- ~~A. Inform the patient of the risk of stalking after termination of the relationship.~~
- ~~B. Advise the patient to get a restraining order against the perpetrator to assure that contact will desist.~~
- ~~C. Encourage the patient to seek marital counseling to make one final attempt to repair the relationship.~~
- ~~D. Tell the patient she is doing the right thing and should not have waited so long.~~

~~Answer: A~~

~~RATIONALE: Informing the patients of the risk of terminating the relationship will provide the necessary information to allow the patient to make appropriate preparations to enhance her safety. A restraining order, although an option, does not guarantee a person's safety. Encouraging a victim to stay in an abusive relationship is inappropriate as is making judgments about the person's decision to leave.~~

~~—16. Components of a safety plan for the victim of IPV include (select all that apply):~~

- ~~A. Make copies of important documents~~
- ~~B. Determine location of shelters~~
- ~~C. Save money~~
- ~~D. Take valuables from abuser~~

~~Answers: A, B, C~~

~~RATIONALE: The first choices are all part of the safety plan, taking valuables from the perpetrator of abuse is inappropriate and may lead to legal issues.~~

~~—17. A nurse preparing for a presentation on economic abuse at a local senior center will include information about (select all that apply):~~

- ~~A. Financial exploitation is a common form of elder abuse, yet is not often reported.~~
- ~~B. Economic abuse can have a serious effect on a person's emotional health and well-being.~~
- ~~C. Family members or caregivers may be the perpetrators of economic abuse.~~
- ~~D. An elderly person who has limited financial resources is at lower risk of economic abuse.~~

~~Answers: A, B, C~~

~~RATIONALE: Choices A, B, and C are all correct. Economic abuse can impact any elderly person, regardless of their financial status.~~

~~—18. A nurse is working in the community and is preparing a presentation for a local group of parents about child abuse. Which of the following would the nurse most likely include in this presentation?~~

- ~~A. Physicians are the individuals responsible for reporting suspected child abuse.~~
- ~~B. Child abuse primarily involves emotional and sexual abuse.~~

~~C. The perpetrator is commonly someone the child knows.~~

~~D. When children do reveal abuse, they experience revictimization.~~

~~Answer: C~~

CHAPTER 25

Psychiatric-Mental Health Nursing Across the Continuum of Care

—1. Match the following patients with the level of care that is probably most appropriate for them.

1.1. A patient with a diagnosis of depression can safely live at home when his partner is not at work, but the patient needs supervision during the day.	A. Residential services
1.2. A patient who has been diagnosed with paranoid schizophrenia and alcoholism requires a structured treatment environment but is not deemed a danger to himself or the community.	B. Partial hospitalization
1.3. A patient with bipolar disorder is standing on a street corner without clothes on and attempting to give passers-by “hugs from Jesus.”	C. Acute inpatient care
1.4. A patient came to the emergency department after having attempted suicide by asphyxiation and now requires stabilization before she can no longer be considered at risk.	D. Psychiatric emergency care

Answers: 1.1—B; 1.2—A; 1.3—C; 1.4—D

—2. Which of the following tasks most closely corresponds to the role of providing consultative-liaison mental health services?

A. Assisting diverse independent mental health care providers with evaluation

B. Providing mental health services to geographically distant rural locations

C. Assessing patients in a nonpsychiatric setting, developing a care plan to be carried out by other staff at that facility, and educating those staff as needed

D. Helping patients coordinate benefits from multiple insurance plans and government assistance programs

Answer: C

—3. Which of the following is a distinctive characteristic of mental health facilities based on the clubhouse model?

A. The members hire professional staff to partner with them as they work on their recovery.

B. The facility is open on a drop-in basis to anyone who pays a fee.

C. The health care setting does not hire professional staff but instead functions more like a 12-step program.

D. Treatment focuses on modalities such as role playing and play therapy.

Answer: A

—4. Which of the following is a goal of the outpatient care setting for mental health patients?

- A. Treat more patients in less time, being more efficient than an inpatient setting
- B. Integrate patients into the community while providing them with the level of care needed
- C. Assess patients and refer them to the appropriate inpatient or community-based setting
- D. Use talk therapy to treat patients with problems such as depression and personality disorders, while largely avoiding medication management and patients with illnesses such as schizophrenia

Answer: B

—5. Which of the following is the primary goal of the Association for Ambulatory Behavioral Healthcare's (AABH's) model for the movement of patients along the continuum of care?

- A. Provide patients with the maximum level of treatment that will be paid for
- B. Move patients to the least level of treatment such that they do not pose a danger to themselves or the community
- C. Describe various levels of outpatient care in terms of the level of service provided
- D. Use variables related to the level of services provided and patient needs to move the patient to a clinically optimal and cost-effective level of care

Answer: D

—6. During a presentation on careers for psychiatric mental health nurses, a nursing instructor uses the term "telehealth." Which of the following most accurately describes this treatment delivery system?

- A. The nurse uses a telephone, a computer, email, or interactive video to deliver a variety of mental health care services to rural or immobile patients.
- B. The nurse records information on a variety of mental health topics, which patients can access by calling a toll-free number and selecting the topic of interest from a touch-tone menu.
- C. The nurse calls patients on the telephone on a daily, weekly, or monthly basis to provide supportive therapy and ongoing assessment.
- D. The nurse appears on a cable television show in which she speaks on mental health topics or interviews other experts about mental health topics.

Answer: A

—7. A patient with paranoid schizophrenia decompensates and is determined to need ambulatory Level 1 mental health care. Which of the following services would be appropriate?

- A. Inhome services
- B. 23-hour observation bed
- C. Assertive community treatment
- D. Day treatment program

Answer: D

—8. A patient with bipolar disorder indicates that he may be entering a manic phase and does not feel capable of functioning appropriately at work. Which of the following are characteristics of the ambulatory Level Three category of health care he will be provided (select all that apply)?

- A. Medical consultation is not necessarily provided but is available if needed.
- B. Patients receiving this level of treatment should have the ability to form and maintain relationships outside of treatment.
- C. Care is individualized and coordinated but not highly structured.
- D. The treatment setting might be a partial hospitalization program.

| E. The goal is crisis stabilization and to provide an alternative to inpatient treatment.

| Answers: A, B, C

—9. What is meant by “Least restrictive environment?”

- A. An unlocked unit
- B. Outpatient setting
- C. The level of care which provides needed safety measures with the least limitation of freedom
- D. Involuntary admission

Answer: C

—10. Psychiatric mental health nursing employs the purposeful use of self as its art, based on whose nursing theory?

- A. Peplau
- B. Nightingale
- C. Watson
- D. Swanson

Answer: A

—11. When a patient is hospitalized on a medical unit but requires psychiatric care as well, this is generally provided by:

- A. The unit nurses
- B. The unit physicians
- C. The psychiatric consultation/liaison team
- D. The case manager

Answer: C

—12. A patient admitted to an inpatient unit is assessed by the nurse as requiring a Spanish language interpreter. What are the nurse’s options?

- A. A family member
- B. A certified Spanish Language interpreter
- C. A visitor
- D. A mental health assistant

Answer: B

—13. A patient is being referred for a Level Two ambulatory behavioral health care service. Which of the following might the nurse expect to be used?

- A. Partial hospitalization program
- B. Assertive community treatment
- C. Day treatment program
- D. Clubhouse program

Answer: A

—14. A PMHN is working with patients with psychiatric mental health disorders who are incarcerated. The nurse is engaging in which of the following?

- A. Forensic nursing
- B. Disaster response
- C. Case management

~~D. Telehealth~~

~~Answer: A~~

—15. A patient who is exhibiting acute psychotic symptoms is determined to be of threat to himself. Which level of care would be most appropriate for the patient to receive?

- A. Acute inpatient care
- B. Partial hospitalization
- C. Psychiatric emergency care
- D. Residential services

Answer: A

—16. After teaching a group of students about housing services along the continuum of care, the instructor determines that the students need additional teaching when they identify which of the following as an example?

- A. Halfway house
- B. Psychiatric home care
- C. Supervised apartment
- D. Therapeutic foster care

Answer: D

CHAPTER 26

Vulnerable Populations and the Role of the Forensic Nurse

—1. A clinic's mission statement speaks to serving vulnerable populations. Which of the following groups might be included in the clinic's mission (select all that apply)?

A. Individuals involved in the criminal justice system

B. Homeless individuals

C. Women

D. Unemployed individuals

E. Individuals with developmental disabilities

Answers: A, B, E

—2. Which of the following has a disproportionate rate of incidence among African Americans as compared with Whites?

A. Schizophrenia

B. Conduct disorder

C. Suicide

D. Bipolar disorder

Answer: C

—3. A nurse learns that her patient, diagnosed with schizoid personality disorder, is homeless and served in the armed forces during the Iraq and Afghanistan wars. Which of the following topics would be least appropriate to explore with this patient?

A. Whether the patient has job skills

B. Whether the patient has been diagnosed with posttraumatic stress disorder or any other disabling condition as a result of combat

C. The status of the patient's physical health

D. Whether the patient has a substance abuse disorder

Answer: A

—4. A public health official gives a presentation about the physical and mental health profile of the incarcerated population. Which of the following is a primary reason for the high rate of incidence of mental health problems among incarcerated individuals?

A. A tendency toward violence among people with schizophrenia

B. Increasing diagnoses of attention-deficit hyperactivity disorder in the population

C. Transinstitutionalization

D. Increasing prosecution of sex offenders and perpetrators of domestic assault and battery

Answer: C

—5. When considering specialties within psychiatric-mental health nursing practice, a nursing student reads about forensic medicine. Which of the following is a role that a forensic nurse might perform (select all that apply)?

- A. Collect evidence as a sexual assault nursing examiner (SANE)
- B. Identify human remains that are in an advanced stage of decomposition
- C. Deliver primary and mental health care in a prison
- D. Collect and identify biological trace evidence at a crime scene, such as insects and plants
- E. Provide advice to prosecutors and testify in court as a legal nurse consultant

Answers: A, C, E

—6. Forensic nurses working in an incarceration facility needs to navigate a constant tension between:

- A. Working with individuals who cannot leave the facility while being free to leave themselves
- B. Delivering health care in an ethical manner to individuals who lack ethics
- C. Maintaining professional certification in this specialty while staying up-to-date on nursing at large
- D. Compassionately serving the needs of members of a vulnerable population who also require supervision and may regularly violate boundaries

~~Answer: D~~

—7. A nurse working with incarcerated individuals may deliver group therapy on which of the following topics (select all that apply)?

- A. Legal appeals process
- B. Stress management
- C. Victim awareness
- D. Substance abuse
- E. Anger management

Answers: B, C, D, E

—8. The subspecialties of forensic nursing include the following:

- A. SANE
- B. Legal nurse consultants
- C. Correctional nurses
- D. All the aforementioned

~~Answer: D~~

—9. The physician or treating health care provider obtains the patient's informed consent before starting a new antidepressant medication, Brintellix. Which of the following are important elements of informed consent?

- A. Purpose of the medication or other treatment
- B. Potential risks and benefits of taking the medication
- C. Providing a Spanish language interpreter to help the provider to ensure that the patient understands what is being said and what the provider is proposing
- D. Contacting a legal nurse consultant
- E. Contacting the patient's legal guardian, should he or she have one to provide the same information that would normally be presented to the competent patient.

Answers: A, B, C, E

—10. Which of the following is NOT an example of the nursing KSAS competency of safety that minimizes risk of harm to patients and providers through both system effectiveness and individual performance:

A. The nurse administers a new medication to a patient without verifying the name and date of birth and scanning the wrist band of the patient.

B. The SANE nurse makes sure that she does her verbal and physical assessment of a victim of sexual violence in a private room and keeping the patient covered as much as possible as well as explaining to the patient what she is going to do, before actually touching the patient.

C. The correctional nurse is aware of her surroundings at all times and maintains proper boundaries with patients/inmates.

D. The nurse working in a community mental health center provides teaching to patients who are taking psychotropic medications to educate them that the medications can potentially make them more sensitive to the heat and the sun and the appropriate actions to take when spending time outside during the summer months.

Answer: A

—11. The nurse is caring for an elderly patient who has dementia. She has a family member who is her legal guardian. The nurse wants to teach the patient and her caregiver about her medications. The nurse needs to keep in mind the following:

A. The patient's legal guardian needs to be involved in the discussion

B. It would be helpful for the patient's home health care provider to be present for the discussion

C. The patient may or may not be able to comprehend the discussion and be an active participant

D. There are no medications available to help slow the progression of symptoms of dementia

E. Patients with dementia may also have depression

Answers: A, B, C, E

—12. The nurse is working with an outreach van from a local mental health center in an attempt to engage homeless individuals in mental health and/or substance abuse treatment, where appropriate. The nurse is:

A. Aware of her own preconceptions or stereotypes about the homeless and provides care in a respectful manner, as she would for any other patient

B. Aware that all homeless people have substance abuse problems

C. Aware that the homeless person with a chronic mental illness often has comorbid physical health problems such as untreated skin and foot problems, diabetes, HIV, and HTN

D. A and C

E. A, B, and C

Answer: D

—13. The nurse is working in a high school that has a large group of students who have moved to the United States from Somalia. She is doing depression screening for all of the 10th grade students. The nurse should:

A. Realize that the Somali students have all integrated into the American culture and have the same values that other high school students have

B. Keep in mind that it would be helpful to learn something about the Somali culture and how they view illness, disease, mental health problems, and health care treatment.

C. That some of the students from Somalia might be experiencing symptoms of posttraumatic stress disorder (PTSD) as well as depression

D. Assume that the students from Somalia understand the concept and symptoms of depression and feel comfortable talking with the nurse about the symptoms

E. B and C

| Answer: E

~~—14. The nurse is working with patients who are inmates in a local county jail for men. It is important for the nurse to:~~

~~A. Have compassion and a nonjudgmental attitude~~

~~B. Maintain clear boundaries~~

~~C. Keep in mind that individuals in the jail or prison setting may have a higher incidence of Hepatitis C and/or HIV~~

~~D. All the aforementioned~~

~~Answer: D~~

~~—15. It is necessary that the nurse teaches the patient about medications, treatments, procedures, and so on and obtains his/her consent prior to giving the medication, injection, treatment, and so on.~~

~~True-False~~

~~Answer: True~~

~~—16. When working with a client who is part of an ethnic minority group, the nurse :~~

~~A. Needs to be mindful of the patient's cultural, linguistic, and spiritual issues~~

~~B. Understands that minorities have less access, quality, and availability of mental health services.~~

~~C. Use of a family member or poorly trained interpreter may result in poor communication between the nurse and the patient and as a result development of an ineffective treatment plan.~~

~~D. A and B~~

~~E. All of the aforementioned~~

~~Answer: E~~

~~—17. It is important for the nurse to identify vulnerable populations when planning and providing care. These include:~~

~~A. The elderly~~

~~B. Homeless~~

~~C. Those who make more than \$100,000 per year for a family of four~~

~~D. All of the aforementioned~~

~~E. A and B~~

~~Answer: E~~

~~—18. The nurse needs to be aware that some patients have developmental and/or intellectual disabilities. These patients are vulnerable because:~~

~~A. They are sometimes taken advantage of by others~~

~~B. They may have difficulty understanding how to take their medications and when to take them.~~

~~C. None of them can live independently~~

~~D. They may need extra support in the community such as case managers, home health nurses, etc.~~

~~E. A, B, and D~~

~~Answer: E~~

CHAPTER 27

Cultural, Ethnic, and Spiritual Concepts

—1. The following are some competencies a nurse needs to have to enter into therapeutic relationships with diverse patients. Match the following definitions with the aspect of diversity they relate to

- | | |
|---|--------------------------|
| 1.1. A patient has limited understanding of English and little ability to express herself in that language. | A. Ethnicity |
| 1.2. A patient identifies as Native American, specifically as a member of the Lakota-Sioux tribe, and participates in powwows and wild-rice harvests. | B. Spirituality |
| 1.3. A patient is a lapsed Catholic and is married to an unobservant Jew; they are raising their children without a formal faith tradition. | C. Linguistic competence |
| 1.4. A family consists of grandparents who immigrated to the United States from Laos as adults, parents who came here as young children, and children who were born here. | D. Enculturation |

Answer: 1.1 C; 1.2 A; 1.3 B; 1.4 D

—2. A nurse is giving a presentation to community leaders about the impacts of globalization on health care. Which of the following would be properly highlighted as a concern of U.S. immigrant populations?

- A. Health care needs to be delivered in a culturally sensitive manner to ensure that it meets the needs of the person who receives it.
- B. Health care should be delivered in the same way to all persons to ensure that everyone receives the same quality of care.
- C. Health care should be delivered in English, because that is the primary language of most care providers, to ensure that the information given is accurate.
- D. Health care should focus on delivering the same education and treatments to everyone, rather than try to address illnesses individuals may have contracted and experiences they may have had in all corners of the globe.

Answer: A

—3. The patient should not always be considered the primary and, finally, sole decision maker with regard to his or her own health care; in some cultures, important health care decisions are made with the input of a family leader.

True-False

Answer: True

—4. A psychiatric-mental health nurse (PMHN) works in a racially and culturally diverse neighborhood. When choosing terms in which to discuss mental health, the nurse should do which of the following?

- A. Use standard terms, such as “mental illness,” to be as technically correct as possible and align with other sources of information patients may access.
- B. Use standard terms, such as “mental illness,” because the nurse cannot competently master a variety of different terminologies to address individuals of different backgrounds.
- C. Use different terms, such as “emotional problems” or “a case of nerves,” with different individuals and families, because people appreciate nurses who adopt their ethnic identity.
- D. Use different terms, such as “emotional problems” or “a case of nerves,” with different individuals and families, to avoid unnecessarily invoking stigma surrounding mental health.

Answer: D

—5. When addressing the mental health needs of immigrants to the United States, a nurse must be aware of which of the following (select all that apply)?

- A. Information about mental health is limited in many developing countries.
- B. Even when an immigrant has a mental illness, other needs are more urgent.
- C. Individuals from Asia may believe more than others that mental illness is best addressed by personal discipline.
- D. Some immigrants have experienced severe trauma as a part of or cause of their immigration, which may result in posttraumatic stress disorder (PTSD), substance abuse, and/or other mental health problems.
- E. If an immigrant resists mental health treatment because of cultural beliefs, such that mental illness is caused by angry spirits or witchcraft, then that individual cannot be treated.

Answers: A, C, D

—6. An African American male presents with a physical ailment, and a PMHN is called in for a consultation because it is believed the patient also has mental health needs. On assessment, the nurse agrees, but the patient is highly resistant to receiving mental health treatment. Which of the following might be the most appropriate next step?

- A. Give the patient a printout from a website that describes his symptoms and possible treatments.
- B. Engage the patient’s significant other, who has accompanied the patient to his appointment, in a conversation to register her observations and educate her about possible therapeutic interventions.
- C. Prescribe or ask a physician to prescribe a psychopharmaceutical intervention, because the patient refuses to participate in therapy.
- D. Focus conversation with the patient on his mental illness signs and symptoms, because trying to encompass the patient’s lifestyle and any stressors present is too complicated with a resistant patient.

Answer: B

—7. A nursing instructor asks students to identify the components of culturally competent practice. A student responds correctly by identifying which of the following (select all that apply)?

- A. Understand that individuals of many ethnic and national backgrounds will not accept mental health assistance until their illness is acute, so attempting to intervene will only set back the nurse’s therapeutic relationship with the patient.
- B. Be aware of physical illnesses, such as diabetes and heart disease, that have high comorbidity with mental illness to assess for mental illness in patients who may be reluctant to discuss that subject.
- C. Although individuals of certain cultural backgrounds may want to include their immediate or extended family in the discussion of their care, protect the patient by emphasizing that mental health care decisions are the patient’s alone.

~~D. Seek out community resources and viewpoints that can help one learn culturally appropriate language and approaches to providing mental health care.~~

~~E. Whether one is providing care in a secular setting or a faith-based setting, become knowledgeable about the religious backgrounds of patients in the various communities served.~~

~~Answers: B, D, E~~

8. The nurse is assessing a patient in the mental health care clinic. Which of the following actions by the nurse demonstrates a patient-centered approach to care?

- A. The nurse asks the patient if he or she would like to have his or her wife/husband present during the interviewing.
- B. The nurse tells the patient that she will answer the patient's questions once the patient finishing completing all the assessment forms.
- C. The nurse informs the patient that he or she should not bring his or her faith healer at the next appointment to see the PMHN practitioner.
- D. The nurse informs the patient that he or she should be taking the medication prescribed to him or her even if his or her family is not sure taking medicine is the best thing for her mental health condition.

Answer: A

9. A 36-year-old Cuban woman who is an immigrant is brought to the clinic by her husband because she is not taking care of the house and their two children ages 4 and 6 years. He reports that she "just lies around in bed all day." Which of the following questions would be important for the culturally competent nurse to ask?

- A. She is probably bored at home with two small children. Why does not she get a job so she can get out of the house?
- B. Is caring for the children and housework role she has always done in the family before this time?
- C. She's probably exhausted. Why have not you been helping her around the house?
- D. Do you think you should hire someone to care for the children?

Answer: B

10. In order to be effective on an interprofessional mental health team working with diverse populations, the nurse must

- A. Be aware that the physician leads the team
- B. Choose the members of the team
- C. Understand the nurse's own personal attitudes and values
- D. Be responsible for setting the goals for the team

Answer: C

CHAPTER 28

Ethical and Legal Principles

—1. A health care setting's nursing guidelines include a discussion of "nonmaleficence." Which of the following is the correct meaning of this term?

- A. Doing what is best for the patient
- B. Doing what one has promised to do
- C. Doing no harm to the patient
- D. Doing what will produce the most good for the most people

Answer: C

—2. A patient who has been diagnosed with catatonic schizophrenia is assessed to be incompetent. Which of the following would be the correct course of action for the psychiatric-mental health nurse?

- A. Make decisions for the patient using the principle of beneficence as a guide.
- B. In concert with the health care team, make decisions for the patient that reflect a professional consensus about what is in the patient's best interests.
- C. Following the principles laid out by Peplau, do one's best to educate the patient about his rights to make decisions and access health care.
- D. Work with family members and/or social services to see that a representative is appointed to make decisions for the patient.

Answer: D

—3. When a nurse treats every patient with dignity and compassion, regardless of that patient's socioeconomic status, lifestyle choices, or health condition, the nurse is practicing according to which principle?

- A. Justice
- B. Fidelity
- C. Kantianism
- D. Veracity

Answer: A

—4. A nurse is drafting a guide to practice for a health care organization and is incorporating the 1980 Bill of Rights for Mental Health Patients. Which of the following are rights delineated in that law (select all that apply)?

- A. Patients have the right to expect that their information will be kept confidential.
- B. Patients have the right to the most supportive treatment in the least restrictive environment.
- C. Patients have the right to communicate with anyone else they wish, at any time.
- D. Patients have the right to be referred to other levels of mental health services on termination of the current therapeutic relationship.
- E. Patients have the right to develop an individualized plan of treatment and have it carried out by health care professionals.

Answers: A, B, D

—5. Which of the following is a significant stipulation of the 1991 Patient Self-Determination Act (PSDA)?

A. With regard to the use of technology to provide life support, all patients, whether competent or not, must be allowed to make their own decisions.

B. Health care institutions must ask all competent adults admitted as inpatients whether they have an advanced directive and inform these patients of their right to refuse treatment.

C. Patients cannot be held against their will unless they pose a clear and present danger to others.

D. A physician can order a patient to be held in involuntary commitment for up to 3 weeks if the physician seems such abridgement of the patient's rights to be in that patient's best interests.

Answer: B

—6. Place the following mental health care settings in order from most restrictive to least restrictive.

A. Voluntary inpatient hospitalization

B. Day hospital C. Involuntary inpatient hospitalization

D. Outpatient office

Answer: C, A, B, D

—7. In keeping with the mandate to treat patients in the least restrictive environment possible, how should nursing staff respond when a patient with borderline personality disorder erupts in anger and threatens to harm herself?

A. A single staff member should approach the patient to avoid startling or intimidating her.

B. One member of the staff should distract the patient by shouting at her while several others grab her from behind and wrestle her to the ground, where they pin her until she calms down.

C. Several staff members should approach the patient and ask firmly that she adhere to behavioral guidelines; if she does not, she should be placed in wrist and ankle restraints and released when the nurse in charge determines the patient is no longer at risk.

D. Several staff members should approach the patient and make clear they will not allow her to harm herself; if she does not de-escalate her behavior, she should be placed in restraints or seclusion sufficient to ensure her safety, and the nurse should obtain an order for restraint.

Answer: D

—8. Which of the following would constitute a legal and ethical disclosure of otherwise confidential information?

A. Telling a health insurance company, without the patient's written consent, that the patient has been diagnosed with schizoid personality disorder.

B. Telling law enforcement authorities, without the adult patient's permission, that the patient has revealed persistent fantasies about finding his ex-girlfriend and stabbing her to death.

C. Telling the adult child of a 77-year-old patient with significant vision and hearing impairment, without the patient's permission, that the patient's score on the Mini-Mental State Examination (MMSE) indicates moderate cognitive impairment.

D. Telling the spouse of an adult patient, without the patient's consent, that the patient has revealed she is abusing alcohol and is interested in treatment options.

Answer: B

—9. The legal principle of providing a patient with informed consent is a reflection of which ethical principle?

A. Nonmaleficence

B. Autonomy

~~C. Beneficence~~

~~D. All of the aforementioned~~

Answer: B

—10. Although nursing is known as the most caring profession, nurses also have a reputation for behaving uncivilly toward one another. Whether termed incivility, bullying, mobbing, or lateral violence, research demonstrates this negative behavior among colleagues leads to:

~~A. Headaches and insomnia~~

~~B. Anxiety and depression~~

~~C. Loss of concentration and increased work errors~~

~~D. A and B~~

~~E. A, B, and C~~

Answer: E

—11. Health care providers have an ethical and legal responsibility to promote a culture of patient safety. Nurses play a direct role in patient safety by preventing errors and adverse events and promoting absence of preventable harm to their patients. Connect each of these ethical principles with the situation that illustrates its role in patient safety culture.

11.1. Nonmaleficence	A. Using non-culpable system for self-reporting nurse errors
11.2. Trustworthiness	B. Integrating knowledge of patient's cultural beliefs into care
11.3. Human dignity	C. Implementing bar-coded wrist bands for medication reconciliation

Answer: 11.1—C; 11.2—A; 11.3—B

—12. Human rights issues sometimes emerge when nurses face ethical dilemmas in their professional practice. Which of the following nursing care scenarios illustrates a human rights issue that must be addressed?

~~A. A comatose hospice patient's husband is requesting IV hydration that directly conflicts with the patient's living will.~~

~~B. Several nurses called in sick and the unit is understaffed, causing patients to receive medications 1 hour later than ordered.~~

~~C. The nurse is assigned to care for a patient with Ebola, but the hospital has run out of personal protective equipment for the nurse to wear.~~

~~D. All of the aforementioned~~

Answer: C

—13. In the new era of communicating through social media, which of the following facts posted on a nurse's personal blog violates a patient's privacy and confidentiality?

~~A. "Today my feisty octogenarian lady from Brown county died"~~

~~B. "This morning after breakfast five of my patients vomited from food poisoning"~~

~~C. "Here's a picture of the clamp a surgeon left in my patient?"~~

~~D. A and C~~

E. All of the aforementioned

Answer: E

—14. In which of the following scenarios did the nurse's action uphold the ethical principle of beneficence?

A. There is one dose of flu vaccine left and two clients who want it. The nurse decides to give it to the pregnant mother of three school-age children rather than the hospice patient.

B. The wife of a hospice patient does not want her husband to receive morphine for pain because it makes him sleepy. The patient requests the morphine for pain 9/10 and the nurse administers it.

C. A and B

Answer: C

—15. In which of the following scenarios did the nurse's action violates the ethical principle of autonomy?

A. The patient with a drug-seeking reputation has an order for acetaminophen for mild pain and Percocet for severe pain. The patient does not appear to be in pain but reports a pain rating of 8/10. The nurse uses nursing judgment and administers acetaminophen.

B. A client asks for information about complementary therapies for situational depression including acupuncture and medication. The nurse advises the patient that traditional treatments such as medications and therapy are better proven methods and declines to give any other information.

C. A and B

Answer: C

:

—16. In the United States, and in many other countries around the world, health care providers use triage as a method of allocating care in a situation in which resources are limited and need is great. Triage reflects the spirit of the ethical principle of:

A. Utilitarianism

B. Veracity

C. Justice

D. Fidelity

Answer: A

CHAPTER 29

Policy, Policy Making, and Politics for Professional Psychiatric Nurses

—1. When participating in a panel discussion at a conference about how nurses can influence the broader health care environment, a psychiatric mental health nurse draws a distinction between lobbying and political action. Which of the following pairs of definitions draws that distinction correctly?

A. Lobbying is gaining access to members of legislative bodies on behalf of a group or individual; political action occurs when a group of people organizes to influence public opinion.

B. Lobbying is using political contributions to influence elected officials; political action involves grassroots marches, protests, and door knocking.

C. Lobbying is collective or individual action taken to influence an elected official; political action occurs when a group of people organize to influence others.

D. Lobbying is a relatively regulated activity in that lobbyists need to be registered and obey certain laws; political action takes place via political action committees, which are relatively opaque to public scrutiny.

Answer: C

~~2. Match the mission of the organization with the corresponding organization's name.~~

~~3.1. Supports psychiatric-mental health nurses at all levels and their efforts to prevent and treat mental health problems.~~ ~~A. International Society of Psychiatric-Mental Health Nurses~~

~~3.2. Serves the interests of registered nurses and their patients.~~ ~~B. American Nurses Association~~

~~3.3. Offers development programs, networking opportunities, assessment, and grants to nurse educators, education agencies, and health care agencies.~~ ~~C. American Psychiatric Nurses Association~~

~~3.4. Provides a vehicle for psychiatric-mental health nurses to collaborate in promoting equitable, quality care that aligns with principles of diversity and social justice.~~ ~~D. National League for Nursing~~

~~Answer: 3.1 C; 3.2 B; 3.3 D; 3.4 A~~

—3. Since the passage of the Patient Protection and Affordable Care Act (ACA) in 2010, what is not true about the U.S. health care system?

- A. Children can stay on their parents' health insurance plans until the age of 26 years, if those plans offer dependent coverage.
- B. The United States has reached a broad public consensus on the economics of health policy and the role of the federal government.
- C. Health insurance companies cannot deny individuals coverage due to preexisting conditions or terminate coverage because of a health event.
- D. Companies over a certain size must offer health insurance to their employees or pay a fine designed to offset the cost of those individuals' health care.

Answer: B

—4. In a paper about the history of professional relations between physicians and nurses, a nursing student discusses the National Joint Practice Commission (NJPC). Since the NJPC's dissolution in 1979, what has been one of its long-term legacies?

- A. Joint practice committees at the state and local levels continue to provide interdisciplinary forums to discuss and enact change.
- B. Physicians have come to view nurse practitioners and other advanced nurse practitioners as equal partners who merit proportionate compensation and status.
- C. Residual friction between nurses and physicians, the result of the issues that led to the NJPC's dissolution, continues to dominate day-to-day interactions around patient care.
- D. The nursing professional has made significant strides toward reflecting the gender balance of society at large and is no longer a female-dominated profession.

Answer: A

—5. When tracing the legal history of mental health care, a nursing instructor asks students to articulate the significance of the 1970 *Wyatt v. Stickney* U.S. District Court decision. Which of the following would be a correct response?

- A. Individuals with mental illness and developmental disabilities were deemed to be disabled under the Americans with Disabilities Act.
- B. The court ruled for the first time that mental health care providers had to prove that they did not apply different standards for evaluating mental health to individuals of different races.
- C. Reflecting the women's movement of the time, female nurses were assured of pay equal to that of their male counterparts.
- D. Legal precedent was established that a hospital could not hold involuntarily committed patients without providing them with treatment.

Answer: D

—6. A nurse is giving a presentation about what has changed and what has not in psychiatric mental health care field over the past 40 years. Which of the following is true about both the National Joint Practice Commission's (NJPC) report in the 1970s and the Institute of Medicine's (IOM) report in 2010 (select all that apply)?

- A. Physicians resist allowing nurses to contribute everything they could to the treatment of patients
- B. Patients' mental health care needs generally receive the attention they deserve
- C. Mental health care is well coordinated in most settings across the United States
- D. The skills and knowledge of psychiatric nurses do not receive the investment and acknowledgment needed to most benefit patients
- E. Nurses and physicians practice as full partners in redesigning the U.S. health care system

| ~~Answers: A, D~~

—7. Which of the following is a current concern regarding Medicare?

- A. Individuals who retire now are much better off than those who retired in the 1960s when Medicare started, so they will not require as much assistance with health care costs.
- B. The focus of health care has pivoted from pharmaceuticals to holistic and preventive care, making reimbursement for prescription drugs a less important part of Medicare and other insurance plans.
- C. Medicare costs more to fund than it receives in premiums, and costs are projected to rise to insupportable levels.
- D. Although the U.S. population is aging, many of the elderly will have disabling conditions that require long-term care, which is covered under a separate program, and this evolution will eventually relieve the financial pressure on Medicare.

Answer: C

—8. Which of the following are recommendations of the Institute of Medicine’s 2010 report “The Future of Nursing: Leading Change, Advancing Health” (select all that apply)?

- A. Phase out nurse residency programs as obsolete given new education requirements for nurses
- B. In less than 10 years, ensure that four fifths of nurses have a bachelor’s degree
- C. Ensure that nurses have opportunities and motivation to engage in lifelong learning
- D. Fill public and private health care leadership positions with nurses
- E. Collect and analyze data about the nursing workforce on a local level and address policy initiatives at this level

Answers: B, C, D

—9. The curriculum for a bachelor’s degree in psychiatric-mental health nursing has been largely standardized across the United States, with professional organizations having issued clear and specific guidelines pertaining to preparation for this specialty.

True-False

Answer: False

—10. The branches of the U.S. government include:

- A. Legislative, Executive, Judiciary
- B. Legislative and Political
- C. Legislative, Political, and Executive
- D. None of the aforementioned

Answer: A

—11. Bills become laws after:

- A. The public votes on the bills
- B. The legislature approves the bill and the appropriate executive signs the law
- C. The executive branch votes on the bill
- D. A legal nurse consultant is contacted to review the bill
- E. None of the aforementioned

Answer: B

—12. Current local, national, and global mental health policy efforts are focused on:

- A. Improving the lives of those challenged by mental illness
- B. Obtaining additional public resources to prevent and treat mental illnesses

- | ~~C. Protecting the rights of those with mental illnesses~~
- | ~~D. Addressing safety issues related to violence in communities~~
- | ~~E. All the aforementioned~~

| ~~Answer: E~~

~~13. The psychiatric nursing role in policy includes:~~

~~A. Patient advocate~~

~~B. Political activist~~

~~C. Assuring patient medication compliance~~

~~D. A and C~~

~~E. A and B~~

~~Answer: E~~