Psychiatric Mental Health Nursing **(Potter)**
Chapter 1 Framework of Psychiatric-Mental Health Nursing

1) A nursing assistant tells the psychiatric nurse that normal people do not have mental disorders. What action by the nurse is most appropriate?
1. Instruct the nursing assistant that anyone can have a mental health disorder.
2. Alert the nursing manager of the nursing assistant's remark.
3. Refer the nursing assistant back to the psychiatric orientation materials.
4. Disregard the comment because the nurse has no responsibility in this situation.
Answer: 1
Explanation: 1. The nurse should instruct the nursing assistant that, given the right circumstances, anyone can have a mental health disorder. The nursing assistant's ability to provide therapeutic care to patients may be affected if misinformation is not corrected. Referring the assistant back to the orientation materials, alerting the nursing manager, and ignoring the comment do not address the situation directly. The nurse has an opportunity to be a positive role model and teacher and promote therapeutic care.
Page Ref: 3-5
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.C.1. Value seeing health care situations "through patients' eyes." | AACN Essential Competencies: VI.2. Use inter-and intraprofessional communication and collaborative skills to deliver evidence-based, patient-centered care | NLN Competencies: Context and Environment: Examine personal beliefs, values, and biases with regard to respect for persons, human dignity, equality, and justice; explore ideas of nurse caring and compassion | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Discuss the epidemiology of psychiatric and mental health disorders.
MNL LO: 1.4.2. Utilize therapeutic communication skills when interacting with clients.

2) The nurse is teaching the patient about the concept of mental disorders. When instructing the patient, what areas should be covered when explaining what impacts the determination of a mental disorder? Select all that apply.
1. Social conditions
2. Biochemistry
3. Mother-child interactions
4. Brain structure
5. Culture

Answer: 1, 2, 4, 5
Explanation: 1. Research has shown that brain chemicals and processes (biochemistry) are frequently altered in mental disorders. While mother-child interactions are important in mental health, current theory and research emphasize a more biological and societal definition. Contemporary diagnostic testing has demonstrated some structural differences of the brain in persons who have mental disorders. Behavior may be considered part of a mental disorder in one culture, but perfectly normal and acceptable in another. The appropriateness of behavior is judged against what is considered normal or appropriate to both social conditions as well as laws defining standards for behavior in a given society.
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Page Ref: Page 2-4
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Discuss the epidemiology of psychiatric and mental health disorders.
MNL LO: 1.2.3. Distinguish among the different psychosocial theories about the development of mental illness.

3) A student nurse tells her mentor that adolescents are too young to be treated for depression. What information should her mentor provide to help the student understand the epidemiology and treatment of mental health disorders?
1. In 2012, more than two million individuals ages 12 to 17 had a major depressive episode (MDE).
2. Adolescents do not usually receive mental health treatment.
3. All depression in adolescents is connected to illicit drug use.
4. Men are the most likely group to experience depression.
Answer: 1
Explanation: 1. Over 50% of the total population of adolescents experience some form of mental illness. The most common reason for adolescents receiving services was feeling depressed. Of those adolescents who had a major depressive episode, 34.0% used illicit drugs in the past year. Women are more likely than men to experience mental illness.
Page Ref: 4
Cognitive Level: Understanding
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Discuss the epidemiology of psychiatric and mental health disorders.
MNL LO: 1.2.2. Examine the neurobiologic influence on the development of mental illness.

4) A nurse is preparing a presentation on serious mental illness. Which conditions should be included? Select all that apply.
1. Major depression
2. Schizophrenia
3. Adjustment reaction
4. Bipolar disorder
5. Social phobia
Answer: 1, 2, 4
Explanation: 1. Serious mental illnesses create significant disability in the individual's ability to achieve life goals. Serious mental illnesses include major depression, schizophrenia, and bipolar disorder. Although they can have distressing and disabling effects, adjustment disorders and social phobias do not necessarily interfere with the achievement of life goals.
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Page Ref: 3
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Discuss the epidemiology of psychiatric and mental health disorders.
MNL LO: 1.2.4. Examine mental illness from various nursing perspectives.

5) A nursing student is doing a research paper on how to improve psychiatric nursing outcomes for serious mental illness. Which types of research would be most useful? Select all that apply.
1. Nursing
2. Psychosocial
3. Educational
4. Economic
5. Neurobiological
Answer: 1, 2, 5
Explanation: 1. Nursing research can provide information on specific nursing interventions that are most effective. Psychosocial research can provide information on factors that are important in diagnosis and treatment. Educational and historical research may provide important background information but are not necessarily relevant to psychiatric treatment outcomes. Neurobiological research provides important information on both causality and treatment options.
2. Nursing research can provide information on specific nursing interventions that are most effective. Psychosocial research can provide information on factors that are important in diagnosis and treatment. Educational and historical research may provide important background information but are not necessarily relevant to psychiatric treatment outcomes. Neurobiological research provides important information on both causality and treatment options.
5. Nursing research can provide information on specific nursing interventions that are most effective. Psychosocial research can provide information on factors that are important in diagnosis and treatment. Educational and historical research may provide important background information but are not necessarily relevant to psychiatric treatment outcomes. Neurobiological research provides important information on both causality and treatment options.
Page Ref: 5
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Teaching and Learning
Learning Outcome: Distinguish the unique contributions of psychiatric-mental health nursing to other areas of nursing.
MNL LO: 1.2.4. Examine mental illness from various nursing perspectives.

6) The parents of a 22-year-old male who is hospitalized for depression ask the nurse what they should be doing to help. What is the most appropriate response the nurse can make?
1. Refuse to talk with family members because of confidentiality restrictions.
2. Provide the family with education, information, and referral resources.
3. Tell the family members that their son is too old for them to be involved in his care.
4. Inform the family that only the psychiatrist can discuss their son's care.
Answer: 2
Explanation: 2. Although confidentiality must be observed, there are many aspects of care in which a patient's family can help. An important role of the psychiatric-mental health nurse is to ensure that the family is involved in the provision of care to the fullest extent possible. Family involvement in care is not limited by the patient's age. A psychiatric nurse is qualified to discuss mental health treatment.
Page Ref: 5
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: family dynamics | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Distinguish the unique contributions of psychiatric-mental health nursing to other areas of nursing.
MNL LO: 1.5.1. Examine the nature and purpose of mental health interventions directed at individuals and families.

7) A nurse is teaching a class on psychiatric-mental health nursing. She asks her class to identify the most challenging part of this practice. What response would let her know that a student understands the difficulties in providing psychiatric-mental health nursing?
1. "The most difficult part is making correct diagnoses."
2. "The most difficult part is providing advocacy."
3. "The most difficult part is development of the therapeutic relationship and the corresponding therapeutic use of self."
4. "The most difficult part is involving the patient in treatment planning."
Answer: 3
Explanation: 3. The skill set for psychiatric nursing involves all the skills important in all nursing practice, such as making accurate nursing diagnoses, providing advocacy, and involving the patient in treatment planning. However, psychiatric-mental health nursing further emphasizes the importance of self-awareness, empathy, and personal integrity in the development of therapeutic relationships.
Page Ref: 5 -6
Cognitive Level: Evaluating
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: Apply professional standards; show accountability for nursing judgment and actions; develop advocacy skills | Nursing/Integrated Concepts: Nursing Process: Analysis
Learning Outcome: Distinguish the unique contributions of psychiatric-mental health nursing to other areas of nursing.
MNL LO: 1.1.4. Examine the roles of the psychiatric-mental health nurse.

8) What evaluative tool is most important in assessing a patient's mental condition?
1. Beck Depression Inventory
2. Mental Status Exam
3. CAT scan
4. WAIS
Answer: 2
Explanation: 2. The Beck Depression Inventory is important only if the nurse suspects that the patient is depressed. The mental status exam provides an overall picture of the patient's mental condition. A CAT scan is not part of an initial assessment. The WAIS (Wechsler Adult Intelligence Scale) primarily tests intellectual functioning.
Page Ref: 6
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: Apply professional standards; show accountability for nursing judgment and actions; develop advocacy skills | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Distinguish the unique contributions of psychiatric-mental health nursing to other areas of nursing.
MNL LO: 1.5.4. Examine the nurse's role in each of the different types of mental health interventions.

9) The mental health nursing student is preparing to attend a meeting of the mental health care team to discuss possible updates to clients' diagnoses. When preparing for this meeting, the nursing student will consult which reference?
1. *Standards of Psychiatric Nursing Practice*
2. Psychiatric nursing care plan manual
3. *Diagnostic and Statistical Manual of Mental Disorders*
4. Dictionary of common mental disorders
Answer: 3
Explanation: 3. Mental disorders are identified, standardized, and categorized in the *Diagnostic and Statistical Manual of Mental Disorders* published by the American Psychiatric Association (APA). All members of the health care team use this reference. A psychiatric nursing care plan manual is a reference for nursing care. A dictionary will offer only a general definition. *Standards of Psychiatric Nursing Practice* outlines nursing responsibilities but does not apply to clients or other members of the multidisciplinary health care team.
Page Ref: 4-5
Cognitive Level: Applying
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IV. 6. Evaluate data from all relevant sources, including technology, to inform the delivery of care | NLN Competencies: Knowledge and Science: Defining how the evidence on which practice is based is developed and by whom | Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: Describe the psychiatric diagnostic criteria system contained in the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5).
MNL LO: 1.5.4. Examine the nurse's role in each of the different types of mental health interventions.

10) A nurse is caring for a patient who likely has obsessive-compulsive disorder. The nurse is not familiar with the assessment data and behaviors associated this disorder. What action would be most appropriate for the nurse to take?
1. Document all subjective and objective data provided by the client.
2. Ask the primary health provider to identify needed subjective and objective assessment data.
3. Research obsessive-compulsive disorder in the medical dictionary.
4. Consult the *Diagnostic and Statistical Manual of Mental Disorders* for diagnostic criteria.
Answer: 4
Explanation: 4. The *Diagnostic and Statistical Manual of Mental Disorders* provides diagnostic criteria that all members of the health care team will use in the diagnosis process and will serve as a resource for assessment and analysis of data. While communication with the primary care provider is appropriate, knowledge of the DSM is expected in a graduate nurse and this choice does not reflect an application of basic knowledge. A medical dictionary is not specific enough for diagnostic purposes. Documentation of subjective and objective data is appropriate; however, this action is not the most appropriate action to assist the nurse in determining the appropriate assessment and behaviors associated with obsessive-compulsive disorder.
Page Ref: 4-5
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IV. 6. Evaluate data from all relevant sources, including technology, to inform the delivery of care | NLN Competencies: Context and Environment: Apply professional standards; show accountability for nursing judgment and actions; develop advocacy skills | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Describe the psychiatric diagnostic criteria system contained in the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5).
MNL LO: 1.5.4. Examine the nurse's role in each of the different types of mental health interventions.

11) What is the standardized source for classifying psychiatric diagnoses?
1. DSM-III
2. DSM-5
3. ICD-9
4. WHO Disability Schedule
Answer: 2
Explanation: 2. The DSM-III provided a psychiatric classification system using a multiaxial approach that has recently been replaced. The DSM-5 is the official manual approved by the APA and the NIMH for use by all clinicians to diagnose psychiatric and mental health disorders in patients. The ICD-9 provides a set of codes for classifying diseases, injuries, health encounters and inpatient procedures. The WHO Disability Schedule is a generic assessment instrument for health and disability.
Page Ref: 4
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IV. 6. Evaluate data from all relevant sources, including technology, to inform the delivery of care | NLN Competencies: Knowledge and Science: Defining how the evidence on which practice is based is developed and by whom | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Describe the psychiatric diagnostic criteria system contained in the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5).
MNL LO: 1.5.4. Examine the nurse's role in each of the different types of mental health interventions.

12) Which tools and guidelines are included in the DSM-5? Select all that apply.
1. Cultural formulation interview
2. Guidelines for forming a multi-axial diagnosis
3. Directions for use of the manual
4. Suggestions for future research
5. Global assessment functioning scale
Answer: 1, 3, 4
Explanation: 1. The DSM-5 includes a cultural formulation interview, directions for use of the manual, and suggestions for future research. Guidelines for forming a multi-axial diagnosis and a global assessment functioning scale were included in prior editions of the manual.
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Page Ref: 4
Cognitive Level: Understanding
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IV. 6. Evaluate data from all relevant sources, including technology, to inform the delivery of care | NLN Competencies: Knowledge and Science: Defining how the evidence on which practice is based is developed and by whom | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Describe the psychiatric diagnostic criteria system contained in the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5).
MNL LO: 1.1.4. Examine the roles of the psychiatric-mental health nurse.

13) The nurse obtains a new position as a psychiatric-mental health nurse at the generalist level of practice. Based on the Psychiatric-Mental Health Nursing Standards of Practice (ANA, APNA, ISPN), in which areas might the nurse plan programs and intervention to fulfill employment expectations? Select all that apply.
1. Stress management strategies
2. Early diagnosis of psychiatric disorders
3. Parenting classes for new parents
4. Family and group psychotherapy
5. Medication teaching for anti-anxiety medications

Answer: 1, 3, 5
Explanation: 1. Stress management strategies address health, wellness, and care of mental health problems and are appropriate for psychiatric-mental health nursing at the generalist level of practice. Parenting classes for new parents provide teaching that is consistent with the prevention of mental health problems and is consistent with psychiatric-mental health nursing at the generalist level of practice. Family and group psychotherapy is consistent at the advanced practice registered nurse level but not the generalist level. Medication teaching for anti-anxiety medications promotes quality of care for individuals with psychiatric disorders and is vital for psychiatric-mental health nursing practice at the generalist level of practice. Early diagnosis of psychiatric disorders is generally not consistent with the definition or practice of psychiatric-mental health nursing, especially at the generalist level.
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Page Ref: 5-6
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: VII. 5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Knowledge and Science: Defining how the evidence on which practice is based is developed and by whom |
Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: Explain regulatory and professional influences on psychiatric-mental health nursing.
MNL LO: 1.5.4. Examine the nurse's role in each of the different types of mental health interventions.

14) A nurse is a member of a committee assigned to review the roles and responsibilities of the nurses on the psychiatric unit. Which publication will the nurse bring to the first meeting?
1. *Diagnostic and Statistical Manual of Mental Disorders*
2. American Nurses Credentialing Center certification requirements
3. American Nurses Association, *Code of Ethics*
4. *Psychiatric-Mental Health Nursing Standards of Practice*
Answer: 4
Explanation: 4. The *Psychiatric-Mental Health Nursing Standards of Practice* delineates psychiatric-mental health nursing roles and functions and serves as guidelines for providing quality care. The *Diagnostic and Statistical Manual of Mental Disorders* is used by the mental health care team, particularly the psychiatrist, to diagnose clients with mental disorders and is not specific to nursing care issues. The *Code of Ethics* helps to clarify right and wrong actions by the nurse but does not clarify roles and nursing care actions. Certification requirements outline steps toward certification that acknowledge knowledge and expertise, but they do not delineate roles and responsibilities.
Page Ref: 5-6
Cognitive Level: Applying
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IV. 6. Evaluate data from all relevant sources, including technology, to inform the delivery of care | NLN Competencies: Knowledge and Science: Defining how the evidence on which practice is based is developed and by whom | Nursing/Integrated Concepts: Nursing Process: Evaluation
Learning Outcome: Explain regulatory and professional influences on psychiatric-mental health nursing.
MNL LO: 1.5.4. Examine the nurse's role in each of the different types of mental health interventions.

15) A psychiatric nurse wants to comply with the recommendation of the Institute of Medicine (IOM) *Future of Nursing* report that nurses take part in expanded opportunities to lead and share in collaborative improvement efforts. What activity would accomplish this?
1. Taking a course on nursing diagnoses
2. Becoming a nurse-mentor
3. Leading an interdisciplinary team focused on improving patient outcomes
4. Volunteering for extra shifts
Answer: 3
Explanation: 3. Taking a course does not focus on collaborative efforts. Although nurse-mentoring is a leadership activity, it does not necessarily contribute to collaboration. Leading an interdisciplinary team demonstrates both leadership and collaboration. Volunteering for extra shifts does not comply with the IOM recommendation.
Page Ref: 13
Cognitive Level: Applying
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Knowledge and Science: Defining how the evidence on which practice is based is developed and by whom | Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: Explain regulatory and professional influences on psychiatric-mental health nursing.
MNL LO: 1.1.4. Examine the roles of the psychiatric-mental health nurse.

16) What are some of the professional organizations that contribute to psychiatric-mental health nursing? Select all that apply.
1. The American Nurses Association (ANA)
2. The American Psychiatric Nurses Association (APNA)
3. The American Psychiatric Association (APA)
4. The North American Nursing Diagnosis Association International
5. The American Psychological Association (APA)
Answer: 1, 2, 4
Explanation: 1. The ANA advances the nursing profession by fostering high standards of nursing practice. The APNA is the only professional nursing organization that focuses on all levels of psychiatric nursing. The American Psychiatric Association is an organization of psychiatrists, not nurses. The North American Nursing Diagnosis Association International provides approved nursing diagnoses. The American Psychological Association is an organization of psychologists.
2. The ANA advances the nursing profession by fostering high standards of nursing practice. The APNA is the only professional nursing organization that focuses on all levels of psychiatric nursing. The American Psychiatric Association is an organization of psychiatrists, not nurses. The North American Nursing Diagnosis Association International provides approved nursing diagnoses. The American Psychological Association is an organization of psychologists.
4. The ANA advances the nursing profession by fostering high standards of nursing practice. The APNA is the only professional nursing organization that focuses on all levels of psychiatric nursing. The American Psychiatric Association is an organization of psychiatrists, not nurses. The North American Nursing Diagnosis Association International provides approved nursing diagnoses. The American Psychological Association is an organization of psychologists.
Page Ref: 13
Cognitive Level: Understanding
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Knowledge and Science: Defining how the evidence on which practice is based is developed and by whom | Nursing/Integrated Concepts: Teaching and Learning
Learning Outcome: Explain regulatory and professional influences on psychiatric-mental health nursing.
MNL LO: 1.1.2. Recognize the purpose of collaboration in the care of the client with mental illness.

17) A nurse educator is teaching a group of students about the traits of a mentally healthy individual. Which concepts provide information regarding psychological, emotional, and social health? Select all that apply.
1. Behavior
2. Intrapersonal relationships
3. Gender
4. Age
5. Interpersonal relationships
Answer: 1, 2, 5
Explanation: 1. In general, what an individual does (the individual's behavior), how that individual relates to others (the individual's interpersonal relationships between his or her self and others), and how that individual relates to him or herself (the individual's intrapersonal relationships within the mind or the self), provide evidence of psychological, emotional, and social health. There is no evidence that age and gender play a role in defining a mentally healthy individual.
2. In general, what an individual does (the individual's behavior), how that individual relates to others (the individual's interpersonal relationships between his or her self and others), and how that individual relates to him or herself (the individual's intrapersonal relationships within the mind or the self), provide evidence of psychological, emotional, and social health. There is no evidence that age and gender play a role in defining a mentally healthy individual.
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Page Ref: 6-9
Cognitive Level: Analyzing
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Knowledge and Science: Defining how the evidence on which practice is based is developed and by whom | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Evaluate a recovery-focused, wellness approach to patient care based on five domains: biological, psychological, sociological, cultural, and spiritual.
MNL LO: 1.1.1. Distinguish between mental health and mental illness.

18) According to the Murphy-Moller wellness model, which elements occur within the sociological domain? Select all that apply.
1. Environment
2. Kinship
3. Religious faith
4. Moral development
5. Nutrition
Answer: 1, 2
Explanation: 1. According to the Murphy-Moller wellness model, five major wellness domains are used to approach the understanding and treatment of psychiatric illnesses: biological, psychological, sociological, cultural, and spiritual. Environmental factors, such as living conditions, and kinship (relationships with others) occur within the sociological domain. Religious faith falls within the spiritual domain, moral development within the psychological domain, and nutrition within the biological domain.
2. According to the Murphy-Moller wellness model, five major wellness domains are used to approach the understanding and treatment of psychiatric illnesses: biological, psychological, sociological, cultural, and spiritual. Environmental factors, such as living conditions, and kinship (relationships with others) occur within the sociological domain. Religious faith falls within the spiritual domain, moral development within the psychological domain, and nutrition within the biological domain.
Page Ref: 6-9
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.8. Describe the limits and boundaries of therapeutic patient-centered care | AACN Essential Competencies: IX. 8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Evaluate a recovery-focused, wellness approach to patient care based on five domains: biological, psychological, sociological, cultural, and spiritual.
MNL LO: 1.3.2. Discuss ethical dilemmas that arise when caring for a client within the mental health care system.

19) A nurse is providing mental health services to a 45-year-old homeless man who is diagnosed with bipolar disorder. Based on a wellness model, which services could broaden the patient's base of social supports?
1. Medication monitoring
2. Housing assistance
3. Nutritional counseling
4. Individual psychotherapy
Answer: 2
Explanation: 2. Medication monitoring and nutritional counseling address the biological domain in the wellness model. Housing assistance would strengthen the patient's social support base. Individual psychotherapy addresses the psychological domain.
Page Ref: 7
Cognitive Level: Applying
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Evaluate a recovery-focused, wellness approach to patient care based on five domains: biological, psychological, sociological, cultural, and spiritual.
MNL LO: 1.1.1. Distinguish between mental health and mental illness.

20) A nurse institutes an exercise program at an inpatient mental health facility. Which wellness domain does this type of program address?
1. Psychological
2. Sociological
3. Biological
4. Cultural
Answer: 3
Explanation: 3. The psychological domain consists of understanding our attitudes and behaviors. The sociological domain focuses on all aspects of the environment, including interpersonal relationships. The biological domain refers to the ability of all body systems to function in a manner compatible with life and social function and includes exercise. The cultural domain includes customs, and beliefs that are rooted in the patients' cultural background.
Page Ref: 7
Cognitive Level: Analyzing
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: Evaluate a recovery-focused, wellness approach to patient care based on five domains: biological, psychological, sociological, cultural, and spiritual.
MNL LO: 1.1.1. Distinguish between mental health and mental illness.

21) A patient presents to the emergency department. Her husband, who drove her, explains that the patient has a history of depression and told him she intends to take sleeping pills and "just end it all." What stage in the Murphy-Moller wellness model is the patient demonstrating?
1. Recovery
2. Restoration
3. Rehabilitation
4. Relapse
Answer: 4
Explanation: 4. This patient presents at level 1, relapse or initial onset, with a level of wellness that is unstable and acute. In level 2, recovery, symptoms have stabilized. In level 3, rehabilitation, symptoms no longer interfere with normal activities of daily living or regular conversation. Restoration is not an identified part of the wellness model.
Page Ref: 9
Cognitive Level: Analyzing
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Identify patient care needs within three levels of wellness: initial onset/ relapse, recovery, and rehabilitation.
MNL LO: 1.1.1. Distinguish between mental health and mental illness.

22) A 20-year-old college student recently diagnosed with schizophrenia is taking antipsychotic medication to control his hallucinations. Which are appropriate activities for level 2 of wellness that could be included in this patient's treatment? Select all that apply.
1. Referral to a job training program
2. Medication management education
3. Group therapy
4. Inpatient admission
5. Family support group
Answer: 2, 3, 5
Explanation: 2. At level 2 of wellness, the patient is stable but is not yet ready to focus on activities related to the future. Psychoeducational activities, such as providing medication education, are important at this stage. Mutual support groups, including the sharing of experiential knowledge and skills, play an invaluable role in recovery. Inpatient admission might be appropriate in the level 1 phase. Family members, peers, providers, faith groups, community members, and other allies form vital support networks.
3. At level 2 of wellness, the patient is stable but is not yet ready to focus on activities related to the future. Psychoeducational activities, such as providing medication education, are important at this stage. Mutual support groups, including the sharing of experiential knowledge and skills, play an invaluable role in recovery. Inpatient admission might be appropriate in the level 1 phase. Family members, peers, providers, faith groups, community members, and other allies form vital support networks.
5. At level 2 of wellness, the patient is stable but is not yet ready to focus on activities related to the future. Psychoeducational activities, such as providing medication education, are important at this stage. Mutual support groups, including the sharing of experiential knowledge and skills, play an invaluable role in recovery. Inpatient admission might be appropriate in the level 1 phase. Family members, peers, providers, faith groups, community members, and other allies form vital support networks.
Page Ref: 10
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: Identify patient care needs within three levels of wellness: initial onset/ relapse, recovery, and rehabilitation.
MNL LO: 1.5.4. Examine the nurse's role in each of the different types of mental health interventions.

23) Which is a fundamental principle of mental health recovery?
1. Recovery is culturally unrelated.
2. Recovery is holistic.
3. Recovery begins with despair.
4. Recovery is solitary.
Answer: 2
Explanation: 2. Recovery is culturally based and influenced. Recovery encompasses an individual's whole life, including mind, body, spirit, and community. Recovery emerges from hope. Recovery is supported through relationship and social networks.
Page Ref: 10
Cognitive Level: Analyzing
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Teaching and Learning
Learning Outcome: Identify patient care needs within three levels of wellness: initial onset/ relapse, recovery, and rehabilitation.
MNL LO: 1.1.1. Distinguish between mental health and mental illness.

24) A new nurse is discouraged because a patient with whom she has been working for four months recently refused to continue group therapy. The nurse tells her supervisor that she doubts the patient will ever have an effective recovery. What is an appropriate response from her supervisor?
1. "Recovery is probably unlikely for this patient."
2. "The patient is experiencing a setback, not an end to recovery."
3. "The patient should be told that group therapy is her only route to recovery."
4. "The patient should be punished for her refusal to participate."
Answer: 2
Explanation: 2. Individuals optimize their autonomy and independence to the greatest extent possible by leading, controlling, and exercising choice over the services and supports that assist their recovery and resilience. Setbacks are a natural, though not inevitable, part of the recovery process. Recovery pathways are highly personalized. Recovery is based on respect; punishment is not appropriate.
Page Ref: 10 -11
Cognitive Level: Analyzing
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.B.3. Provide patient-centered care with sensitivity and respect for the diversity of human experience | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Identify patient care needs within three levels of wellness: initial onset/ relapse, recovery, and rehabilitation.
MNL LO: 1.1.1. Distinguish between mental health and mental illness.

25) During the shift report, a nurse describes a patient as "crazy." Which approach by the charge nurse would be best?
1. Ask the staff what terminology they wish to use.
2. Disregard the staff member's comment.
3. Suggest that staff use the term "mentally ill."
4. Role model using the term "nervous breakdown."
Answer: 3
Explanation: 3. The nurse should suggest that staff use the term "mentally ill," thus, reinforcing that the patient has an illness. The term "nervous breakdown" is too general and nonspecific for clinical use. Disregarding the comment or asking staff what terminology to use is not implementing the patient advocate role of the professional nurse.
Page Ref: 8-10
Cognitive Level: Applying
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.B.3. Provide patient-centered care with sensitivity and respect for the diversity of human experience | AACN Essential Competencies: IX. 5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Contrast differences in perceptions, thoughts, and feelings of the nurse and the patient during care delivery (patient/other awareness).
MNL LO: 1.4.3. Apply nursing strategies that will facilitate communication with individuals of all age groups.

26) A novice nurse is working with a preceptor on a medical-surgical unit. After assessment of a patient, the novice nurse states to the preceptor, "This patient has many odd ideas about several common health practices. He seems like a deviant to me." What concept will guide the preceptor's response?
1. A definition of deviance that covers all clinical situations.
2. The knowledge that beliefs and behaviors are only deviant if the patient thinks there is a problem.
3. The knowledge that beliefs and behaviors vary according to cultural and social considerations.
4. The need for further assessment to determine the duration of the beliefs and actions.
Answer: 3
Explanation: 3. The appropriateness of beliefs and behaviors are judged according to cultural, social, ethical, and legal rules that define the limits of appropriate behavior and reality. Given the cultural, social, ethical, and legal considerations, there is no definition of deviance that covers all clinical situations. The duration of the beliefs and actions in this situation may be irrelevant. Given the lack of a definitive definition of deviant behavior, the statement that beliefs and behaviors are only deviant if the patient thinks they are a problem is an incorrect statement.
Page Ref: 8-10
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.C.5. Recognize personally held attitudes about working with patients from different ethnic, cultural and social backgrounds | AACN Essential Competencies: IX. 5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Contrast differences in perceptions, thoughts, and feelings of the nurse and the patient during care delivery (patient/other awareness).
MNL LO: 1.4.3. Apply nursing strategies that will facilitate communication with individuals of all age groups.

27) A nurse, newly assigned to a 55-year-old Native American patient diagnosed with major depression, is concerned about the patient's reliance on certain totemic objects for comfort. What should the nurse do in order to address her concern?
1. Tell the patient that he needs to learn to rely upon himself.
2. Ask the patient to explain the significance of these objects.
3. Inform the patient that superstitions will interfere with his recovery.
4. Request a psychiatric consult to help determine if the patient is delusional.
Answer: 2
Explanation: 2. Nurses should be deliberative in determining with patients what their needs are rather than assuming on their own that they know or understand their patients' needs. Asking the patient to explain the significance of these objects will help the nurse better understand the patient's beliefs and needs. The nurse who is more objective and more accepting of patients can improve the quality of nurse-patient interactions. The nurse should be aware of her culturally based judgments. The situation, as described, requires collaboration with the patient rather than a consultation about the patient.
Page Ref: 18
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.C.4.Seek learning opportunities with patients who represent all aspects of human diversity | AACN Essential Competencies: IX. 5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Contrast differences in perceptions, thoughts, and feelings of the nurse and the patient during care delivery (patient/other awareness).
MNL LO: 1.4.3. Apply nursing strategies that will facilitate communication with individuals of all age groups.

28) A 14-year-old female patient tells the school nurse that she frequently cuts herself. The nurse is very upset by this information. What is the best action by the nurse?
1. Report the problem to the principal.
2. Call the girl's parents and suggest a psychiatric evaluation.
3. Reflect on her own reactions and focus on responding to the patient's needs.
4. Shift the conversation to the girl's academic performance.
Answer: 3
Explanation: 3. Because the patient is not in imminent danger, the desire to involve others, whether it is the principle or the girl's parents, must be guided by the patient's choices and the need to respect confidentiality. While developing the nurse-patient relationship, the nurse must learn to respond to the patient rather than react to the patient. Ignoring the issue does not address the patient's needs.
Page Ref: 18
Cognitive Level: Applying
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Contrast differences in perceptions, thoughts, and feelings of the nurse and the patient during care delivery (patient/other awareness).
MNL LO: 6.1.1. Describe the elements of self across the life span.

29) The nurse is caring for a patient with anxiety and depression who tells the nurse, "I am always stressed out." Which factors inform the nurse's understanding of stress? Select all that apply.
1. It relates to an individual's perception of demands being made on him or her.
2. It relates to the individual's perception of his or her ability to meet the demands being made on him or her.
3. It is often a precipitant of anxiety.
4. It is often caused by anxiety.
5. It relates to an individual's perception of others.
Answer: 1, 2, 3
Explanation: 1. Stress relates to an individual's perception of demands being made on him or her, as well as the individual's perception of his or her ability to meet those demands. Stress may be described in numerous ways, including as a precipitant of anxiety. Stress is not caused by anxiety; rather, anxiety is the result of stress. Stress is not related to the individual's perception of others.
2. Stress relates to an individual's perception of demands being made on him or her, as well as the individual's perception of his or her ability to meet those demands. Stress may be described in numerous ways, including as a precipitant of anxiety. Stress is not caused by anxiety; rather, anxiety is the result of stress. Stress is not related to the individual's perception of others.
3. Stress relates to an individual's perception of demands being made on him or her, as well as the individual's perception of his or her ability to meet those demands. Stress may be described in numerous ways, including as a precipitant of anxiety. Stress is not caused by anxiety; rather, anxiety is the result of stress. Stress is not related to the individual's perception of others.
Page Ref: 16
Cognitive Level: Analyzing
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Examine significant concepts related to providing psychiatric and mental health nursing care to all patients.
MNL LO: 5.1.1. Describe the physiological response to stress and the psychodynamics of coping.

30) A 72-year-old patient tells the nurse that she is unable to take her antidepressant medication regularly because her granddaughter forgets to go to the drugstore for her. What perception of life events does this explanation demonstrate?
1. Resilience
2. External locus of control
3. Internal locus of control
4. Primary appraisal
Answer: 2
Explanation: 2. Resilience is the capacity to adapt constructively to difficulty. External locus of control places control of one's life on other people and on circumstances outside the self. Internal locus of control places control within the self. Primary appraisal occurs when an individual determines whether or not the event or stressor will impact his or her well-being.
Page Ref: 16
Cognitive Level: Analyzing
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Examine significant concepts related to providing psychiatric and mental health nursing care to all patients.
MNL LO: 6.1.1. Describe the elements of self across the life span.

31) A group of student nurses were discussing how to promote resilience in their patients and realized that it is a concept they also want to promote in themselves. How might student nurses foster their own resilience?
1. By avoiding challenges
2. By using reflection
3. Through self-reliance
4. Through expecting the worst
Answer: 2
Explanation: 2. Promoting the capacity to adapt constructively to difficulty requires facing challenges. Reflection can help the individual to learn and adapt. Resilience requires a balanced approach to life. Positive emotions promote resilience.
Page Ref: 16
Cognitive Level: Analyzing
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Analysis
Learning Outcome: Examine significant concepts related to providing psychiatric and mental health nursing care to all patients.
MNL LO: 6.1.1. Describe the elements of self across the life span.

32) A nurse is making a presentation to her administration on the need for a room that is comfortable, light, and calming that a patient can use during times of stress. What is the best argument for encouraging implementation at this facility?
1. It has been proven effective.
2. It is required for accreditation.
3. It will be liked by the patients.
4. It presents a more up-to-date care image.
Answer: 1
Explanation: 1. Evidence-based practice is the best argument for implementing new practices. Image and accreditation requirements are important but should be secondary considerations. Patient preferences should be considered but effective outcomes are most important.
Page Ref: 17
Cognitive Level: Applying
Client Need/Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Examine significant concepts related to providing psychiatric and mental health nursing care to all patients.
MNL LO: 1.1.3. Explain impact of evidence-based research on responsibilities of psychiatric-mental health nurse.

33) Which dimension is not commonly affected by suffering experienced by cancer patients?
1. Physical
2. Geographical
3. Psychological
4. Social well-being
Answer: 2
Explanation: 2. Fatigue and pain are dimensions of suffering. Commonalities exist in cancer patients from diverse cultures and locations. Psychological pain includes depression. Social well-being is affected by isolation and withdrawal.
Page Ref: 17
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.B.4. Assess presence and extent of pain and suffering | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Evaluate the relationship of suffering and hope to wellness.
MNL LO: 5.1.1. Describe the physiological response to stress and the psychodynamics of coping.

34) What are some of the goals of trauma-informed care? Select all that apply.
1. Understand symptoms as attempts to cope.
2. Provide regular medication education and monitoring.
3. Collaborate between provider and consumer at all phases of service delivery.
4. Protect patients with a history of trauma from physical harm and re-traumatization.
5. Focus on what has happened to the person rather than what is wrong with the person.
Answer: 1, 3, 4, 5
Explanation: 1. Trauma-informed care is designed to inform caregivers about and sensitize them to trauma-related issues present in trauma survivors. A trauma-informed system is one that accommodates vulnerabilities of trauma survivors, avoids re-traumatization and exacerbation of symptoms for those who have been traumatized, and facilitates patient participation in treatment. Medication management is not an essential part of trauma-informed care.
3. Trauma-informed care is designed to inform caregivers about and sensitize them to trauma-related issues present in trauma survivors. A trauma-informed system is one that accommodates vulnerabilities of trauma survivors, avoids re-traumatization and exacerbation of symptoms for those who have been traumatized, and facilitates patient participation in treatment. Medication management is not an essential part of trauma-informed care.
4. Trauma-informed care is designed to inform caregivers about and sensitize them to trauma-related issues present in trauma survivors. A trauma-informed system is one that accommodates vulnerabilities of trauma survivors, avoids re-traumatization and exacerbation of symptoms for those who have been traumatized, and facilitates patient participation in treatment. Medication management is not an essential part of trauma-informed care.
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Page Ref: 17
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.B.4. Assess presence and extent of pain and suffering | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Evaluate the relationship of suffering and hope to wellness.
MNL LO: 5.1.1. Describe the physiological response to stress and the psychodynamics of coping.

35) A nurse is providing services at a shelter established for tornado survivors. The nurse is wondering what she is accomplishing just by listening to the disaster victims. Why is it important for the nurse to use active listening when caring for these patients?
1. It assists patients through suffering.
2. It assists patients to receive therapy.
3. It assists patients on focusing on the present issue.
4. It assists patients to recall events.
Answer: 1
Explanation: 1. The nurse's presence and willingness to listen to patient stories can give meaning to the experience of suffering and assist the patient through suffering. While active listening is a therapeutic communication technique, it is not considered therapy. The nurse's use of active listening does not assist patients on focusing on the present issue or to recall events.
Page Ref: 18
Cognitive Level: Applying
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.A.9. Discuss principles of effective communication | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Evaluate the relationship of suffering and hope to wellness.
MNL LO: 1.4.3. Apply nursing strategies that will facilitate communication with individuals of all age groups.

36) A patient ready to leave a substance abuse rehabilitation facility tells the nurse that he understands that he must avoid his former associates and join Nar-Anon in order to find new connections. What stage of hope is this patient exhibiting?
1. Bracing for negative outcomes
2. Continuously evaluating signs to reinforce selected goals and the revision of these goals
3. Developing a realistic appraisal of personal resources and external conditions and resources
4. Making a realistic appraisal of an event and the threat to self
Answer: 3
Explanation: 3. The patient's stated plan does not include bracing for negative consequences. Although it may be part of his plan, this statement does not indicate continuous evaluation. The patient is making a realistic appraisal of his needs and resources. He has already made a realistic appraisal of events.
Page Ref: 18
Cognitive Level: Evaluating
Client Need/Sub: Psychosocial Integrity
Standards: QSEN Competencies: I.B.4. Assess presence and extent of pain and suffering | AACN Essential Competencies: IX. 3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: Evaluate the relationship of suffering and hope to wellness.
MNL LO: 5.1.1. Describe the physiological response to stress and the psychodynamics of coping.