Chapter 01- Introduction to Psychiatric-Mental Health Nursing

1. A nurse is giving a presentation about preventing mental illness to college freshmen. A student asks, “What does it mean to be mentally healthy?” Which of the following potential responses by the nurse is best?

A) “Mental health is difficult to define and depends on cultural norms.”
B) “Mental health is marked by productivity, fulfilling relationships, and adaptability.”
C) “Mental health is characterized by the absence of mental illness.”
D) “Mental health is the performance of behavior that is accepted as normal.”

2. A 48-year-old independent, successful woman is recovering from a modified radical mastectomy. She states she was grateful that during the first few weeks after surgery her mother stayed with her and did “everything” for her. Which element of mental health does this reflect?

A) Reality orientation
B) Mastery of the environment
C) Self-governance
D) Tolerance of the unknown


A) Because it states clearly that there are effective treatments for mental illness
B) Because it allocates research money to psychiatric facilities
C) Because it sets new guidelines for use of restraints
D) Because it establishes reimbursement guidelines for third-party payers

4. While a nurse is performing an admission assessment for a mental health client, the client states that all of his problems have been caused by his parents. The nurse knows that psychological factors that can influence mental health include which of the following?
5. What is the primary purpose of the five-axis system used in the fourth edition of the Diagnostic and Statistical Manual of Mental Disorders, 4th edition, text revision (DSM-IV-TR)?

A) To separate the various mental disorders into five related categories
B) To give a comprehensive picture of client functioning
C) To improve prognostic ability
D) To provide a decision-making algorithm for pharmacologic treatment

6. One limitation of the DSM relates to diagnostic labels given to children. The most problematic issue caused by applying adult categories to children is which of the following?

A) It prevents the proper treatment of childhood disorders.
B) The criteria for diagnosis of a disorder are flexible for an adult, but not for children.
C) Categories are based on manifestations of adult disorders, not research in children.
D) The DSM was written before childhood psychological conditions were recognized.

7. Which of the following represents a problem complicating the treatment of people with mental illness?

A) Insurers’ reimbursement decisions
B) Increased responsibility for care by state mental hospitals
C) Overuse of the well-coordinated mental health care system
D) Lack of effective treatments

8. Julie, a 47-year-old woman, missed 1 week of work when she was hospitalized with bipolar disorder. She was placed on medication and was able to return to work. When asked about her absence, Julie informed coworkers that she was suffering from influenza. What is the most likely reason Julie lied about her illness?

A) This is a sign that the medication is not effectively treating her illness.
B) Fear of rejection, isolation, and discrimination based on her mental health diagnosis
C) Due to workplace policies that encourage the firing of those with mental illnesses
D) To avoid eliciting sympathy among her coworkers

9. A 22-year-old man with a history of a recent suicide attempt is being treated for depression. Prior to becoming depressed, the client attended a prestigious art school and enjoyed many social and leisure activities. Of the following long-term goals for this client, which is consistent with an overarching recovery goal for all clients with mental disorders?

A) The client will not injure himself.
B) The client's symptoms will be reduced.
C) The client will show interest in social and leisure activities.
D) The client will resume pre-illness functioning.

10. Which of the following approaches to care best reflects cultural competence?

A) Always assign nurses of a specific ethnic background to clients with the same ethnic background.
B) Learn the behaviors and values associated with people of specific ethnic backgrounds.
C) Assess the culturally mediated beliefs of each client.
D) Believe that people are more alike than they are different.

Chapter 02- Neuroscience-Biology and Behavior

1. The basic units of structure and function in the nervous system are called which of the following?

A) Glial cells
B) Neurons
C) Axons
D) Dendrites

2. The structure and function of a neuron form the basis for the overall function of the nervous system. What are the components of a neuron?

A) A glial cell, nucleus, organelles, dendrites, and axons
B) A glial cell, nucleus, dendrites, and synapses
C) A cell body, nucleus, organelles, dendrites, and axons
D) A cell body, nucleus, axon, and synapses

3. A patient has researched the role of neurotransmitters in her mental illness. What is the role of neurotransmitters?
A) Excite the receptor cell located inside the synaptic cleft.

B) Inhibit the receptor cell found inside of glial cells.

C) Communicate information within the receptor cell.

D) Communicate information from one cell or cell group to another.

4. Because neurotransmitters are responsible for immediately transmitting impulses between nerve cells, they are known as which of the following?
   A) First messengers
   B) Second messengers
   C) Receptors
   D) Synapses

5. A nurse is caring for a patient who is addicted to alcohol and drugs and is discussing the pathway of the brain responsible for this behavior. The nurse should know that the pathway of the brain thought to be involved in pleasurable sensations and the euphoria resulting from use of drugs is called the:
   A) Tuberinfundibular dopamine pathway
   B) Nigrostriatal dopamine pathway
   C) Mesocortical dopamine pathway
   D) Mesolimbic dopamine pathway

6. A client lives with acquired deficits in emotional control, memory, and learning. What part of this client's brain is most likely affected?
   A) Basal ganglia
   B) Brainstem
   C) Limbic system
   D) Cerebellum

7. You are caring for a mental health client who has developed difficulty with balance and muscle tone after a car accident that involved a head injury. Based on this information, what area of the brain was most likely injured in the accident?
   A) Diencephalon
   B) Brainstem
   C) Cerebellum
   D) Pons

8. A client who experiences dysfunction in the hypothalamus is most likely to have
   A) Maintaining homeostasis
   B) Processing sensory input
C) Secreting melatonin
D) Integrating motor activities

9. Sensory deprivation in infancy and childhood has adversely affected a boy's brain development. Which characteristic of the brain was most directly involved in this process?
   A) Neuroplasticity
   B) Reactive plasticity
   C) Adaptive plasticity
   D) Synaptic plasticity

10. Rather than being 100%, concordance rates for schizophrenia in monozygotic twins are only 50%. Which of the following statements best explains this phenomenon?
   A) Genetic predisposition to disease is frequently overstated.
   B) One twin is inherently more vulnerable in every case.
   C) Environmental experiences affect gene expression.
   D) The genetic pathway responsible for vulnerability is unrelated to being a twin.

Chapter 03- Conceptual Frameworks and Theories

1. A psychiatric–mental health nurse is aware of the importance of theories in the development and delivery of care. Which of the following is the best definition of a theory?
   A) A group of related concepts or ideas
   B) A person's or group's beliefs about how something happens or works
   C) A prediction about two or more concepts
   D) A researchable question related to health care

2. Which of the following explains why theories are important to psychiatric–mental health nursing?
   A) Theories provide more treatment options for clients.
   B) Theories add professionalism to health care.
   C) Theories simplify treatment decisions for most clients.
   D) Theories lead to the expansion of knowledge.

3. A client has been told by a psychologist that memories in his unconscious are contributing to his depression. This reasoning implies that the psychologist ascribes to what theory?
   A) Psychoanalytic theory
   B) Behavior theory
   C) Cognitive–behavioral theory
4. A client's current plan of care includes interventions that are rooted in the concepts of reinforcement. Which theory of human behavior is being prioritized during this client's care?

A) Humanistic theory  
B) Sociocultural theory  
C) Behavioral theory  
D) Psychoanalytic theory

5. A client and her therapist have been discussing the notion that her psychopathology results from the blocking or distortion of personal growth, excessive stress, and unfavorable social conditions. This discussion is congruent with what theory?

A) Humanistic theory  
B) Interpersonal theory  
C) Biophysiological theory  
D) Sociocultural theory

6. During marital counseling, a man complains that his wife often “bombards” him with problems as soon as he settles down at home after work, which results in a prolonged argument. The wife admits that she does this but states she feels neglected and that her husband does not take the family problems seriously. She doesn't want her marriage to turn out like her parents’ marriage. The wife admits that she sometimes provokes an argument in order to gain her husband's attention. How would a behaviorist most likely explain the wife's actions?

A) She has repressed painful memories about her emotionally distant father and is working out her anger at the parent in the marital relationship.  
B) Her thoughts about her parents' unhappy marriage are a justification for her behavior.  
C) She has an underlying anxiety disorder.  
D) The long argument in which she and her husband participate positively reinforces her behavior.

7. An adult man recalls that he was teased as a child about his inability to participate in sports. He began to avoid situations in which others might evaluate his behavior. He seeks treatment now because he is an accomplished musician but cannot perform for an audience. According to behavioral theory, his behavior is an example of which of the following concepts?

A) Discrimination  
B) Modeling  
C) Generalization  
D) Shaping

8. The nurse is working with a client who admits to having low self-esteem. The care team has determined that cognitive restructuring will likely enhance the client's self-esteem. Which of the following best describes the goals of this intervention?
A) Avoid negative self-talk
B) Replace negative self-talk with positive statements
C) Change distorted thinking and the subsequent behaviors
D) Use adaptive defense mechanisms

9. A 55-year-old woman is being treated for narcissistic personality disorder. The therapist demonstrates caring and appropriate regard for the client. The therapist's behavior is an example of which concept of behavior theory?
   A) Shaping
   B) Discrimination
   C) Modeling
   D) Conditioning

10. In a group therapy session, group members confront a 35-year-old woman about her abuse of prescription pain medications. The woman states that, because a physician has prescribed her medication, she is not a drug addict. The nurse identifies this as an example of which of the following defense mechanisms?
    A) Regression
    B) Projection
    C) Denial
    D) Sublimation

Chapter 04- Evidence-Based Practice

1. The nurse demonstrates a commitment to the health, safety, and welfare of people by providing evidence-based practice. What does the term “evidence-based practice” mean?
   A) Care that integrates research and clinical expertise with the client's characteristics, culture, and preferences
   B) Care that bases decision making on established clinical protocols
   C) Care based on prior outcomes from the nurse's practice
   D) Care based on outcomes and research conducted by the practitioner

2. Many pseudoscientific practitioners function openly and market themselves as mainstream “therapists.” Why does the public often respond favorably to unconventional therapies?
   A) Pseudoscientific therapies are frequently more effective than conventional therapies.
   B) Further advancements can be made in effective pseudoscientific treatments with continued practice.
   C) Malpractice is minimized because pseudoscientific treatments are not empirically supported.
D) Some clients and families are disenchanted with the outcomes of professionally approved treatments.

3. Nursing is both an art and a science. Which statement best represents how evidence-based practice encompasses these two aspects of nursing?

A) The art of nursing has been replaced by evidence-based practice.

B) Multiple theoretical perspectives no longer guide evidence-based nursing care.

C) The art of nursing is demonstrated through carrying out the science of nursing in a skillful, knowledgeable, intelligent, and ethical manner.

D) The artful side of nursing is of less value to positive patient outcomes than is the science of nursing.

4. Evidence-based practice is based on the scientific method and empirical evidence. Which of the following is a principle of empirical evidence?

A) Scientific observations are subjective inferences made by the knowledgeable nurse researcher.

B) Empirical studies may be designed to report the physical and mental effects of subjective experiences.

C) Empirical evidence is not appropriate in the field of mental health because cognitions and emotions are subjective and unpredictable.

D) Empirical knowledge is verifiable only with valid and reliable measurement instruments.

5. The nurse is part of a team conducting a research study that involves controlled observations. Controlled observations involve which of the following activities?

A) Putting information together to form a new understanding

B) Watching something carefully and noting events

C) Testing a hypothesis or prediction

D) Determining whether data are reliable and supportive

6. Two patients with schizophrenia have consented to be involved in clinical trials to determine the efficacy of a new antipsychotic medication. The researcher administers the new drug to one subject and a sugar pill to another subject. The patient who received the sugar pill received a treatment that is considered which of the following?

A) Sham treatment

B) Unethical treatment

C) Placebo

D) Supplemental therapy

7. A research team has been formed to study a new medication and its effects on depression. The researcher wants to use a design where neither the clients nor the research staff will know who is receiving the medication or the placebo. What type of study is this group conducting?

A) An empirical study

B) An evidence-based study

C) A case-control study
8. A researcher is determining whether data that were obtained in a psychiatric nursing study are reliable and whether the data support the study hypothesis. In what part of the scientific process is the researcher functioning?
   A) Experimentation  
   B) Analysis  
   C) Synthesis  
   D) Prediction

9. The nurse is working with a 42-year-old female patient who is mildly overweight. The patient expresses a desire to “tone up” before summer and is interested in trying an over-the-counter weight loss remedy. The nurse should perform health education related to what subject?
   A) To be wary of any product that claims rapid or effortless results without exercise  
   B) The relatively low risk of using natural remedies  
   C) The small amount of active ingredient in most over-the-counter treatments  
   D) To choose a product that reports data indicating a high degree of effectiveness

10. Many people get health care information from the Internet. Hence, evidence-based health care can be threatened by the proliferation of pseudoscientific information available to the public. Which measure is currently being taken to prevent the misinformation of the healthcare consumer?
    A) Evidence-based knowledge is currently only disseminated in professional journals and publications.  
    B) The Food and Drug Administration (FDA) has been denied the jurisdiction to prosecute unscrupulous internet marketers.  
    C) Public education is being performed by the Federal Trade Commission (FTC) through a campaign called Operation Cure All.  
    D) Websites publicizing misinformation on the Internet are being screened and blocked.

Chapter 05- Legal and Ethical Aspects

1. A psychiatric–mental health nurse has been consistently aware of the need to adhere to standards of practice during interactions with clients and their families. What is a standard of nursing practice?
   A) The body of text in the state nurse practice act  
   B) A document outlining minimum expectations for safe nursing practice  
   C) Unwritten but traditional practices that constitute safe nursing care
2. Nursing students are reviewing the nurse practice act in the state where they reside. A state's nurse practice act has which of the following functions?

A) Makes recommendations for how nurses should practice
B) Defines the scope and limit of nursing practice
C) Defines specific situations that constitute malpractice
D) Follows federal laws about nursing practice

3. A psychiatric–mental health nurse has been named in a malpractice suit in which certain criteria have to be demonstrated by the client's legal team. Which of the following lists includes the correct criteria?

A) Duty of care, professional performance, injury related to the nurse's action, action foreseeably could have caused the injury, and proven injury
B) Duty of care, professional performance, injury related to the nurse's action, failure to document injury, and proven injury
C) Professional performance, injury related to the nurse's action, action foreseeably could have caused the injury, and proven injury
D) Duty of care, professional performance, injury related to the nurse's action, and action foreseeably could have caused the injury

4. A class of nursing students are learning how to protect themselves from liability for malpractice. How can the students best do this once they begin providing care for clients?

A) Know and follow the statutory and professional standards.
B) Avoid documenting incriminating information.
C) Carry individual malpractice insurance.
D) Request legal consultation from their employers.

5. A physician would like to include a client with schizophrenia in a research study testing a new medication. What is the nurse's primary obligation in this situation?

A) Ensure the client knows what he or she is agreeing to when providing consent.
B) Help the client with revoking consent once the study has started.
C) Obtain informed consent when the primary provider cannot be present.
D) Persuade the client to consent, because the new drug has shown promising results.

6. An adolescent client has refused to wash or change his clothes for several days. He smells and looks filthy. Three male staff members approach him to escort him to the shower. The client resists and becomes combative when staff members insist. They place the client in seclusion and restraints and tell him that they will release him when he is calm and willing to shower. The client's rights have been which of the following?

A) Not been violated, because a degree of cleanliness is important
B) Been violated, primarily because he should not be forced to shower
C) Been violated, primarily because of the inappropriate use of restraints
D) Not been violated, because his combative behavior warranted seclusion and restraint to protect others

7. A client was admitted to a psychiatric facility because he was found walking around the street naked and talking incoherently. He has no known next of kin and has been adjudicated incompetent for the first time following a thorough assessment. He refuses any antipsychotic medications but has not been harmful to himself or others. What action should the facility take?
A) Initiate court proceedings to have a guardian named
B) Convince the client of his need for care
C) Continue custodial care
D) Contact social services to find outpatient housing

8. A client with a diagnosis of depression has been admitted to the health care facility. From a legal standpoint, clients hospitalized as voluntary admissions differ from other types of admissions in which of the following ways?
A) They can dictate their own plan of care independently.
B) They are considered legally competent.
C) They are considered a danger to themselves or others.
D) They cannot refuse treatment.

9. A 25-year-old man is seen standing on a rooftop. His employer calls the police and tells them the man had been behaving strangely. When the police arrive, the man states that he has special healing powers and no harm will come to him. The man believes the police have been provided to him as a courtesy, and he willingly accompanies them to a psychiatric facility. His admission is considered what?
A) Involuntary admission
B) Legal admission
C) Coerced admission
D) Emergency admission

10. A client with persistent depression is considering electroconvulsive therapy (ECT). The nurse has seen ECT be effective in other cases. When the client expresses fear and doubt about undergoing ECT, the nurse tries to talk him into taking it, truly believing it will help him. Which two ethical concepts are in conflict?
A) Beneficence and fidelity
B) Fidelity and paternalism
C) Paternalism and autonomy
D) Beneficence and autonomy
Chapter 06- Culture

1. A nurse who provides care in a diverse, urban center is aware of the importance of culture in the planning and delivery of psychiatric–mental health care. Which of the following statements is the best brief definition of culture?
   A) Culture refers to a person's racial background.
   B) Culture refers to a person's religious and spiritual beliefs.
   C) Culture is a shared structure for living.
   D) Culture is a society's particular social norms.

2. A nurse has conducted a thorough assessment of a new client's cultural context prior to creating a care plan. Why is understanding a client's cultural context most important to a mental health worker?
   A) Because it influences perceptions of health and illness
   B) Because it influences the adoption of traditional gender roles
   C) Because it helps the care provider avoid offending the client
   D) Because it helps the care provider determine the client's prognosis

3. Long-term planning is taking place in a large, multisite health care system. Planning must reflect current demographics while anticipating future changes. If demographic predictions are accurate, which cultural group will constitute approximately 25% of the U.S. population by 2050?
   A) White European Americans
   B) African Americans
   C) Hispanic Americans
   D) Asian Americans

4. A group of psychiatric–mental health nurses have completed an educational session on strategies for fostering cultural congruence. Cultural congruence is defined as:
   A) Agreement between and among people of different cultural backgrounds
   B) Assimilation of a minority culture into the dominant culture
   C) Feelings of belonging despite cultural differences
   D) The expression of personal and cultural validation

5. A nurse working in an urban clinic is gathering data about the use of preventive mental health services by the clinic's clientele. The nurse is surprised to learn that more than 80% of the clients using this service are white, while the area's residents are predominantly African American and Asian American. Which of the following statements most likely explains the data?
   A) The clinic's white clients may value mental health services more than members of the other groups.
B) African Americans and Asian Americans may consider seeking mental health care to be a sign of weakness.

C) African Americans and Asian Americans may distrust the predominantly white mental healthcare system.

D) The clinic's African Americans and Asian Americans may require mental health services less frequently than do their white counterparts.

6. An occupational health nurse is asked to see a Muslim employee, who is a recent immigrant to the United States. The client has been sent to the nurse because she appears weak. Her supervisor states that for several days the client has not eaten lunch with other employees as she had done formerly and refuses to join them despite repeatedly being asked to do so. The nurse suspects a cultural reason for the client's condition. Which step should the nurse take next?

A) Contact the client's husband for an explanation.

B) Ask the client if she is participating in a religious or cultural ritual.

C) Offer the client food to eat in the privacy of the nurse's office.

D) Ask the client if she has been receiving treatment from a traditional healer.

7. A nurse previously set a goal of fostering transcultural nursing knowledge to provide better care for clients. Which of the following represents an action associated with the third phase of the development of transcultural nursing knowledge as defined by Leininger?

A) Developing a research study about the influence of religious beliefs on health-seeking behaviors

B) Implementing a different assessment tool in a mental health clinic after reading a research study about cultural barriers to thorough assessment

C) Assessing the culturally mediated beliefs of each client

D) Reading about Muslim and Hispanic cultures

8. Nurses cannot possibly learn all the variations that exist in culturally mediated beliefs. Which of the following approaches would be most helpful when caring for clients from other cultures?

A) Focus on the client's own constructs for health and illness.

B) Teach each client about the diversity of cultures that exists in the region.

C) Explain one's own cultural beliefs or the cultural expectations of the health care environment.

D) Allow the client to practice his or her religious rituals.

9. A psychiatric–mental health nurse has become acutely aware that there are significant differences between Western psychiatric treatment modalities and those of other cultures. Which factor sets Western health care practices apart from the practices of other cultures?

A) A holistic approach to care

B) Reliance on technology

C) Belief in stress as the cause of most illnesses
D) A higher rate of successful treatment

10. A female nurse enters the room of a male client who is about to undergo a procedure. The client is a Cambodian monk, and the nurse knows that he is forbidden to be touched by a woman. When the nurse tries to apply cardiac monitoring leads to his chest, the client recoils in horror. The nurse is angry and insulted. Which of the following statements best explains the nurse's reaction?

A) The nurse is demonstrating a lack of self-knowledge.
B) The nurse understands she has made a mistake.
C) The nurse is justified, because the client also should be aware of his own cultural beliefs.
D) The nurse is justified, because some touching during the delivery of care is unavoidable.

Chapter 07- Spirituality in Psychiatric Care

1. A psychiatric nurse has facilitated a patient's recent attendance at a church service and has arranged for another to attend his nephew's bar mitzvah. These are examples of:

A) Religious practices
B) Spiritual beliefs
C) Cultural values
D) Social customs

2. Different individuals and groups conceptualize spirituality in different ways. What is a central component of a definition of spirituality?

A) The belief in eternal life
B) The belief in God
C) The belief in a power apart from one's own existence
D) The connection between spirituality and religion

3. A nurse's colleague has questioned the objective usefulness of spirituality and religious practices. Which of the following statements best describes a connection between religious involvement and health that the nurse could cite?

A) There is little or no relationship between religious involvement and improved health.
B) Religion is related to better mental health but has no effect on physical health.
C) Better physical and mental health and a healthier lifestyle are associated with religious practice.
D) There are better subjective feelings of health but no demonstrable effects on longevity.

4. A team of psychiatric nursing researchers have encountered difficulty while attempting to plan a research study addressing patients' and clients' spirituality. Which of the following factors would have the most influence on improving the research into spiritual and religious effects on health?

A) More rigorous study design
B) Increased research funding
C) Better control of confounding variables
5. A psychiatric–mental health nurse is aware that spiritually based interventions must be carefully matched with individual clients. For which of the following clients would spiritual interventions be most appropriate?

A) A client who has a difficult relationship with her parents and who has indicated a willingness to seek change
B) A client who believes God is speaking to him in an audible voice throughout the day
C) A client with a diagnosis of schizophrenia who believes he is all-powerful
D) A client with postpartum depression who believes her children are in danger of becoming possessed by demons

6. The nurse is interviewing a client who states that she lives alone and follows no religion. The nurse contemplates how lonely the client must be, living by herself and having no religious community for support. The nurse's thoughts reflect what?

A) Empathy
B) Lack of self-awareness
C) Prejudice
D) Compassion

7. A client is his early 30s has just experienced the end of a 2-year relationship with a woman he planned to marry. The client states that he is confused about his life and feels hopeless about his future. Which of the following nursing responses would be most therapeutic?

A) Suggest he give himself time to get over the failed relationship
B) Ask him what is most important to him in his life
C) Tell him many other women are available and that he will meet someone when the time is right
D) Suggest that the client explore the possibility of antidepressant medication

8. The nurse is assessing a client with depression. Which of the following questions will be most helpful in determining if the client has spiritual needs?

A) “How is religion or spirituality important to you in this illness?”
B) “Do you attend church regularly?”
C) “Would you like to discuss your religious beliefs?”
D) “What religious rituals are important to you?”

9. A female psychiatric–mental health nurse has asked whether the client has a “deep faith.” The nurse states that people with strong religious beliefs have better health outcomes and suggests
that the client return to the religious practices of his childhood. Are the nurse's comments a cause for ethical concern?

A) No, because she has not tried to force her own religious views on the client
B) No, because her suggestions are within the scope of nursing practice
C) Yes, because she is not an expert in the area, yet her professional status implies that her advice is expert
D) Yes, because her views are paternalistic

10. A client who is receiving care on an inpatient basis tells the nurse he would like to develop his spiritual self. He asks the nurse how he can do so. Which of the following responses is best?

A) “Would you like to speak with a chaplain?”
B) “Some people pray, read religious texts, or keep a journal to gain spiritual insight. You might start by keeping a journal.”
C) “The concepts of repentance and forgiveness are useful. Would you like to try that?”
D) “I suggest you use meditation to help you gain spiritual insight. You don't have to be any particular religion to do it.”

Chapter 08- Nursing Values, Attitudes, and Self Awareness

1. After caring for a psychiatric–mental health client suffering from schizophrenia, a nurse begins to analyze his attitudes and assumptions about individuals with this condition. This nurse is attempting to achieve a higher level of what?

A) Self-awareness
B) Client bias
C) Self-actualization
D) Client awareness

2. It is not uncommon for new psychiatric–mental health students to be fearful of interacting with individuals suffering from mental illness. The fear and misunderstanding of those with mental illness are known as which of the following?

A) Discrimination
B) Bias
C) Prejudice
D) Stigma

3. A group of recent nursing graduates are discussing the numerous sources of stigmatization of those with mental illness. Which of the following has contributed most significantly to this phenomenon?

A) The psychotic symptoms displayed in the community by those who suffer from phobias
B) Intense media coverage about mental illness and the accurate portrayal of symptoms experienced by those with mental illness
C) Films that show what the experience of visual hallucinations can be like for someone who is mentally ill
D) Dramatic and inaccurate depictions of individuals with mental illness in movies and literature

4. A public health campaign has been launched to address some of the myths surrounding mental illness. What are shared values, norms, or beliefs that bind groups together and that may underlie myths?
   A) Essentials
   B) Ideologies
   C) Belief systems
   D) Global morals

5. A community health nurse has been asked to develop a plan to improve the local community's negative attitudes toward those suffering from mental illness. Which of the following would best assist the nurse in accomplishing this goal?
   A) Read a book about people who suffer from mental illness and try to understand the client's perspective.
   B) Interview clients suffering from various mental illnesses.
   C) Identify myths underlying the negative attitudes in the community and improve factual information about mental illness.
   D) Read descriptions of mental illness from the Diagnostic and Statistical Manual (DSM) to individuals in the community.

6. While completing a rotation in a mental health facility, you are observing a client who is becoming increasingly agitated. He begins yelling at other clients and then picks up a chair and throws it against a wall. You are asked to document what you witnessed. Which of the following would be the most appropriate documentation?
   A) “Client is engaging in attention-seeking behavior and is argumentative and disruptive.”
   B) “Client is acting crazy by yelling at other clients and throwing objects.”
   C) “Client is displaying aggression including yelling at other clients and throwing a chair.”
   D) “Client is a psycho, is argumentative, aggressive, and disruptive.”

7. After having a conversation with a depressed client, a nurse is thinking about possible factors that may explain why the client is depressed. This nurse's thinking exemplifies which of the following?
   A) Attribution theory
   B) Assumption theory
   C) Dispositional theory
   D) Situational theory

8. Two junior nursing students are discussing their beliefs about the root causes of mental illness. One nurse states that mental illness is caused by genetic and personality factors. Personal qualities that are cited as the cause of a behavior or action are known as which of the following?
   A) Attribution factors
9. The brother of a client with bipolar disorder states that he believes his brother's disorder is a result of the unhealthy interactions he had with his parents and peers while growing up. What are outside elements that influence a person's behavior called?

A) Attribution factors  
B) Assumption factors  
C) Dispositional factors  
D) Situational factors

10. Clients who are admitted to mental health facilities are a vulnerable population. Actions that a nurse might never engage in as an individual may be demonstrated in a group setting due to perceptions of:

A) Power  
B) Knowledge  
C) Inferiority  
D) Insight

Chapter 09- The Nursing Process in Psychiatric-Mental Health Care

1. A psychiatric–mental health nurse is applying the nursing process during interactions with a client who has bipolar disorder. The nursing process is best described as:

A) A linear procedure for risk management  
B) A framework for critical thinking about nursing care  
C) An educational tool that enhances care and learning  
D) A framework for documenting the plan of care

2. A nurse awaits the arrival of a client who is being transferred from another health care facility. The client has a history of schizophrenia and has been experiencing an exacerbation of symptoms. The nurse begins preparing the plan of care by outlining expected outcomes. How should this nurse's action be interpreted?
A) It is consistent with the nursing process, because goals should be identified before interventions.

B) It is inconsistent with the nursing process, because assessment always comes first.

C) It is consistent with the nursing process, because the goals generally will be applicable to all clients with schizophrenia.

D) It is inconsistent with the nursing process, because the nurse should establish goals with the client.

3. A nurse has begun to implement the nursing process by performing a comprehensive assessment of a new client. Which of the following is the best example of assessment?

A) Monitoring behavior and mental status after administering an antipsychotic

B) Determining if the client has benefited from stress management education

C) Asking the wife of a comatose client if the client has a history of diabetes

D) Teaching the client to self-monitor heart rate with aerobic activity

4. When developing a nursing diagnosis during the care of a client, the nurse begins by considering the fundamental idea that is being addressed. What axis is this nurse considering?

A) Judgment

B) Status

C) Subject

D) Diagnostic concept

5. The client and nurse have agreed that a goal of care is for the client to manage conflict assertively. After learning assertiveness techniques, the client feels ready to practice them. The nurse correctly applies knowledge of the evaluation step of the nursing process and demonstrates skill by doing what?

A) Documenting that the goal has been met

B) Suggesting that the client attend assertiveness training classes before documenting that the goal has been met

C) Waiting to hear how the client has put the skills into practice before documenting that the goal has been met

D) Asking the client to restate the techniques before documenting that the goal has been met

6. A client relates that since the tragic death of her husband 3 years earlier, she has ceased to participate in social activities and spends much of her time looking at old photo albums. She states that thinking about enjoying herself causes her to feel guilty and anxious. Which of the following diagnoses is most applicable?

A) Anxiety related to fear of social interaction as evidenced by statements about feeling nervous and guilty

B) Impaired Social Interaction related to lack of desire for social contact as evidenced by anxiety

C) Dysfunctional Grieving related to death of husband as evidenced by reliving past experiences and feelings of guilt and anxiety
D) Spiritual Distress related to death of husband as evidenced by restricted lifestyle, anxiety, and guilt

7. A nurse develops a plan of care for a client who has been diagnosed with an eating disorder. The plan includes developing a contract with the client to modify behavior. What is the next step?

A) Implement nursing actions that have been identified.
B) Evaluate the effectiveness of the contract.
C) Diagnose the client with Ineffective Coping as evidenced by need to binge and purge to manage stress.
D) Assess the client's current weight and body mass index.

8. After completing an assessment of a new client, the psychiatric–mental health nurse has identified priority nursing diagnoses. Which of the following is the most accurate definition of a nursing diagnosis?

A) A clinical judgment about individual, family, or community responses to actual or potential health problems/life processes
B) A statement about client problems that can be treated by independent nursing interventions
C) A clinical judgment about individual, family, or community responses to actual health problems/life processes
D) A statement about client/community problems that can be treated by independent nursing interventions

9. A psychiatric–mental health nurse has identified nursing diagnoses relevant to a client's care. The organization of the client's nursing diagnoses is based on groups with common factors. This organizing scheme is known as what?

A) Clusters
B) Taxonomy
C) Axes
D) Levels

10. A nurse has collaborated with a client who has schizophrenia and identified outcomes relevant to the client's care. Which of the following represents a realistic and measurable outcome for the client?

A) The client will feel better 1 month after initiating therapy.
B) The client will participate in milieu activities.
C) The client will wash daily and come to the dining hall at dinnertime.
D) The client will gain insight into his mental health issues.

Chapter 10- The Interview and Assessment Process

1. The nurse is conducting an admission interview with a psychiatric–mental health client. The nurse notes that the client has a flat affect and the client reports he has been feeling depressed. What activity is the nurse engaging in?
2. After conducting an interview with a psychiatric–mental health client, the nurse writes in the nurses notes that the “client possesses poor insight.” What activity is the nurse engaging in?
   A) Assessment
   B) Planning
   C) Evaluation
   D) Data collection

3. A recently graduated psychiatric–mental health nurse is feeling highly anxious before conducting an interview with a client. This feeling of anxiety is likely to be:
   A) Beneficial to the interaction by increasing the nurse's focus and attention
   B) Detrimental to the interaction by decreasing the nurse's focus and attention
   C) Beneficial to the interaction by increasing the client's self-awareness
   D) Detrimental to the interaction by decreasing the client's self-awareness

4. Jillian, a psychiatric–mental health nurse, has initiated a process recording after gaining the consent of the client. What is the purpose of process recording?
   A) It allows the nurse to see what effect his or her communication style has on the client.
   B) It allows the nurse to identify abnormalities in the client's communication techniques.
   C) It allows the client to explore alternate communication techniques that can be used.
   D) It allows the client to identify characteristics of his or her communication style.

5. During a particularly busy time on the psychiatric unit, the nurse has been asked to identify a location to conduct an interview with a psychiatric–mental health client. What factor should the nurse prioritize when choosing a location?
   A) The amount of lighting in a given location
   B) The client's right to a stress-free environment
   C) The client's right to privacy
   D) The numbers of distracters in a given location
6. A psychiatric–mental health nurse has identified a suitable location in which to conduct a client interview. Which of the following seating arrangements in the room is likely to be the least threatening to the psychiatric–mental health client?

A) Sitting at an angle, 4 to 5 feet apart  
B) Sitting face to face, 4 to 5 feet apart  
C) Sitting at an angle, 1 to 2 feet apart  
D) Sitting face to face, 1 to 2 feet apart

7. A psychiatric–mental health nurse is using the PERSONS tool to collect data in the initial interview with a client. Under the first “S” of this tool, the nurse would assess which of the following?

A) Safety  
B) Self-efficacy  
C) Symptoms  
D) Substance use

8. While conducting an admission interview with a client in the emergency department, the nurse suspects that the client may be a heavy user of alcohol. Which of the following assessment tools can help the nurse screen for potentially problematic alcohol use?

A) PERSONS  
B) CAGE  
C) CIWA-Ar  
D) MSE

9. A nurse is conducting a review of systems during a comprehensive assessment of a psychiatric–mental health client. Which of the following questions would most likely be included in this assessment?

A) Do you take any medications?  
B) How often do you drink alcohol?  
C) Do you have any numbness or tingling anywhere?  
D) How would you describe your life growing up?

10. A client has been brought to the emergency department displaying symptoms that suggest the need for a mental status examination. Which of the following should the nurse include in this assessment?

A) A review of basic physiological function  
B) Evaluation of the client's insight and judgment  
C) Questions regarding the client's past behaviors  
D) Evaluation of the client's medication compliance

Chapter 11- Therapeutic Relationships and Communication
1. A nurse learns that a distant family friend has been admitted to the inpatient psychiatric unit where the nurse works. The nurse understands that it is not acceptable to discuss this with family or neighbors, because doing so would breach the client's confidentiality. Confidentiality is a central component of what element of the therapeutic relationship?

A) Competence  
B) Sympathy  
C) Trust  
D) Autonomy

2. The nurse provides a new client with information about the antidepressant he has been prescribed and refers him to a community support group. What essential element of a therapeutic relationship is the nurse demonstrating?

A) Empowerment  
B) Fidelity  
C) Professionalism  
D) Recovery

3. During an assessment interview, a client frequently expresses concern about how her mental health problems will affect her grandmother. The client's grandmother, mother, and father attend a family session, during which the nurse frequently acknowledges the grandmother. In doing so, the nurse is demonstrating what?

A) Confidentiality  
B) Empathy  
C) Trust  
D) Respect

4. The parents of a teenage client meet with the nurse for the first family session following the client's recent suicide attempt. The nurse expresses empathy with the parents about the stress and worry they have felt over the client's condition. Which of the following reasons most likely explains the nurse's action?

A) The nurse wishes to show respect for the family.  
B) The nurse wants to offset the mother's protective behaviors.  
C) The nurse wants to take the focus off the mother.  
D) The nurse is unable to create distance from the family.

5. An adult client has a history of severe psychological abuse by her mother, who has schizophrenia. The nurse plans to ask the client details about each incident of the abuse and how it has affected her sense of self-esteem. This is an example of what kind of intervention?

A) Caring
6. A male client was discharged from care several months ago after successful treatment for depression. Now, the client is back in the health care facility with severe depression, and all the former issues have returned. The nurse says to a coworker, “This is unbelievable; we're back at square one again. He should know better at this point.” The nurse's comments reflect what?

A) Countertransference
B) A judgmental attitude
C) An acceptable level of frustration
D) Her underlying concern for the client

7. A nurse is conducting a life skills program for people who have mental illness. A young adult with schizophrenia asks the nurse to call her on the weekends so she has someone to talk to who really cares about her. Which of the following actions should the nurse take?

A) Tell the client she will call once per week during office hours so that the client can practice phone skills
B) Tell the client firmly that such a request is an inappropriate violation of their professional relationship
C) Temporarily call the client once each weekend to build trust
D) Tell the client to call the office answering service in case of an emergency

8. A nurse therapist recently began meeting with a client in an effort to address some of the client's symptom-management strategies. Which of the following actions by the nurse or client represents the working phase of the therapeutic relationship?

A) Setting goals
B) Communicating interest in the client
C) Identifying past ineffective behaviors
D) Reviewing work that has been done

9. During a therapy session, the nurse states, “So you're saying that you've tried many techniques for dealing with your anxiety but haven't felt any better?” This is an example of which of the following therapeutic communication techniques?

A) Validating
B) Paraphrasing
C) Confirming
D) Offering a broad opening

10. A client says to the nurse, “Nobody cares about anything I say; even you don't!” Which of the following responses is most therapeutic?
A) “Why do you say I don't listen to you?”

B) “It sounds like you're overreacting somewhat.”

C) “It sounds like you're feeling ignored.”

D) “I listen to you.”

Chapter 12 - Working With the Multidisciplinary Team

1. The nurse is admitting a patient whose present health condition has led to a sharp decline in her performance of activities of daily living. After the admission assessment, the nurse collaborates with the physician and arranges for an occupational therapist to assess the patient's needs. The nurse suggests this consult for which primary purpose?
   A) To reduce the work load of nursing staff
   B) To complete the treatment plan in a timely manner
   C) To expand the nurse's scope of practice
   D) To enhance the client's health outcomes

2. The school nurse would most likely be involved in a team in formulating an individualized education program (IEP) for which of the following students?
   A) An 8-year-old with a history of aggressive behavior toward peers
   B) A 14-year-old whose father has recently been called into military service
   C) A 9-year-old who has just moved to the area from out of state
   D) A 10-year-old who has tested at a level of gifted intelligence

3. The nurse is part of a multidisciplinary team for a 10-year-old girl who has a history of self-mutilation. As the team members develop a behavior plan of care, the nurse should prioritize what action?
   A) Encourage the girl to get involved in extracurricular activities to distract herself from self-destructive urges.
   B) Take a nursing history to confirm a diagnosis of borderline personality disorder.
   C) Review her academic record to document that she qualifies for extra assistance.
   D) Outline a behavior contract with the girl delineating the consequences of self-destructive behavior.

4. The school nurse is meeting with a child whose grades have declined over the past several months. The boy's teacher states that the child squints when looking at the whiteboard and reads at a very close distance to his books. The nurse would refer this information and submit a request for a consult with whom?
   A) A social worker
   B) A physical therapist
   C) An occupational therapist
5. The nurse is working in an after-school activities program for children with developmental disabilities. The nurse notes one young boy sitting out most of the exercises. The nurse learns that the child needs physical therapy, but his parents cannot afford the treatments. The nurse submits a request for a consult with which member of the multidisciplinary team?

A) The dietician  
B) The social worker  
C) The occupational therapist  
D) The child psychologist

6. Tony, a 7-year-old boy, has been acting out in class. The school psychologist wants to determine what affective, cognitive, and environmental factors may be contributing to this. Which assessment would best achieve this goal?

A) Functional Behavioral Assessment (FBA)  
B) Sensory Integration Assessment (SIA)  
C) Individualized Education Assessment (IEA)  
D) Service Coordination Assessment (SCA)

7. Samantha, an 8-year-old girl, has been experiencing problems in school and is demonstrating speech and language delays. She is diagnosed with sensory integration dysfunction and is scheduled to meet with an occupational therapist (OT). The OT's role will most likely include what?

A) Determining what dietary interventions will help Samantha with her condition  
B) Providing Samantha with sensory information to help organize the central nervous system  
C) Providing Samantha with individual counseling to address behaviors that interfere with learning  
D) Promoting and enhancing Samantha's coping and problem-solving abilities

8. A 27-year-old woman has just been admitted to a drug and alcohol rehabilitation facility for abuse of prescription Oxycontin. The dietitian visits the patient during her first day of treatment for which purpose?

A) Assessing the changes in eating patterns that are symptomatic of many mental disorders  
B) Assessing any nutritional factors that may be contributing to cognitive, emotional, and behavior problems  
C) Changing the patient's diet to match her psychotropic medication regimen  
D) Planning an educational component on nutrition and health maintenance as part of the treatment and discharge plan

9. A 55-year-old client has a complex medical and psychiatric history and uses mental health services at a variety of sites. Who is the team member most often serving as a liaison, ensuring
that the team is aware of the patient's current needs and progress and that the necessary services are being provided?
A) Psychiatrist  
B) Psychologist  
C) Social worker  
D) Occupational therapist

10. The home health nurse has been providing care for an elderly married couple. The wife underwent knee replacement surgery 3 weeks ago. The husband calls the nurse because he is worried that his wife has little motivation to perform her rehabilitation exercises. The husband states that his wife has also been behaving in a paranoid and emotionally erratic manner. Considering the possible impact of the wife's recent immobility and medications, the nurse notifies which member of the multidisciplinary team?
A) The psychologist  
B) The psychiatrist  
C) The mental health clinical nurse specialist  
D) The social worker

Chapter 13- Individual Therapies and Nursing Interventions

1. A client with post-traumatic stress disorder (PTSD) has begun a course of treatment that includes psychotherapy. Psychotherapy is best described as which of the following?
A) Psychotherapy is synonymous with psychoanalysis.  
B) Psychotherapy is a process of helping clients make adaptive changes in their lives.  
C) Psychotherapy is a form of beneficial behavior modification that is necessary for health.  
D) Psychotherapy is used solely for clients with Axis I disorders.

2. A new client is surprised to learn that his plan of care will not likely include psychoanalysis sessions, since he previously assumed that these were a cornerstone of treatment. Which of the following statements offers the most likely explanation for the decline in the use of Freudian psychoanalysis?
A) Insurers will often not cover the costs.  
B) It involves too many diagnostic tests.  
C) It can make clients worse.  
D) It does not require a trained therapist.

3. A nurse therapist feels emotionally drained after sessions with a client. The client's passiveness reminds the therapist of a family member who led a very unhappy life. What is the term for this emotional dynamic?
A) Transference
B) Countertransference
C) Free association
D) Reaction formation

4. A client has recently completed her first session of cognitive therapy. Within this treatment modality, the term “cognition” refers to what?
   A) The neurological deficits that result in her abnormal behavior
   B) How a client thinks about herself and her world
   C) The client's ability, or inability, to process stimuli
   D) Dysfunctional ways of responding to situations

5. An APRN-PMH is participating in cognitive therapy with a client who has a diagnosis of obsessive-compulsive disorder. The nurse is aware of Beck's cognitive triad when working with this client. Beck's cognitive triad consists of which of the following?
   A) Self, the world, and the future
   B) Others, the past, and the future
   C) Self, others, and the present
   D) Self, the world, and the present

6. A client states that she is anxious about leaving a group home because she has not worked in many years. Using Beck's cognitive triad, the nurse understands that the client is concerned primarily about what?
   A) Threats from the world
   B) Threats to her self
   C) Threats about her future
   D) Threats from her past

7. A 37-year-old woman who is counseling characterizes her life as an abject failure, despite the fact that she has a healthy, stable family and has built a successful business with her husband. What does this woman's thinking represent?
   A) Rationalization
   B) Cognitive distortion
   C) Delusional thinking
   D) Self-aggrandizement

8. A client grew up in an isolated subculture that had a rigid understanding of religious belief and expression. The accumulation of this person's learning and experience that results in core beliefs is known as what?
   A) Schema
   B) Culture
9. A client in therapy has been postponing speaking to her mother about a traumatic event in her childhood. The client cries when she thinks about bringing this up, saying, “I'll fall apart, and it will kill her.” Which of the following responses by the nurse is most appropriate?

A) “What evidence do you have that that will happen?”
B) “What is the worst thing that could happen if you spoke to her?”
C) “What other options do you realistically have at this point?”
D) “Falling apart about this may be a turning point for you.”

10. During dialectical-pharmacologic behavior therapy (DBT), the therapist is actively listening and is accurately reflecting the client's spoken and unspoken feelings. What is this core strategy of DBT known as?

A) Criticism
B) Validation
C) Client acceptance
D) Contradiction

Chapter 14- Groups and Group Interventions

1. A nurse recognizes that individuals typically belong to several different groups simultaneously. A group that a person voluntarily joins because of common interests with the other members is:

A) A formal group
B) A secondary group
C) A primary group
D) An informal group

2. An ongoing support group for new mothers of children with autism has been meeting for several months. A new member comments that she does not have time to come to a group “just to talk.” Other members meet the woman's comments with silence. Which of the following statements best explains this situation?

A) The new member is insecure.
B) The group is closed to outsiders.
C) The new member has violated group norms.
D) The group has not accepted the new member.

3. Which of the following statements would be associated with autocratic leadership?

A) “I'd like you all to develop an action plan and send it to me on Friday.”
4. A nurse therapist is forming a support group for the family members of clients who have schizophrenia. The therapist understands that group dynamics will result in various members assuming certain roles. Which of the following are the three major categories of group roles?

A) Building and maintenance, task, and individual
B) Harmonizer, gatekeeper, and follower
C) Aggressor, recognition seeker, and blocker
D) Information giver, coordinator, and information seeker

5. A therapy group is in session, and one member shares that she feels hopeless about her future. Another member responds by saying, “I felt hopeless once, but then I went back to school to better myself. It was hard; sometimes I don't know how I did it. But I got great grades, the kids turned out well, and I have a well-paying job. Anyone who wants to can do it.” This group member is playing what role?

A) Group task role
B) Group building role
C) Individual role
D) Group maintenance role

6. One member of a substance-abuse recovery group consistently performs an individual role during the group's meetings. Individual roles typically have what effect on group functioning?

A) Disrupt group functioning
B) Enhance group functioning
C) Encourage the contributions of others
D) Have no effect on group functioning

7. A group of women recovering from intravenous drug use meets weekly. One member, who has been a powerful presence, has missed several consecutive meetings. When she returns, she explains her prolonged absence in vague terms. Another group member suspects she is using drugs, but does not share this with the group. Instead, she appears mildly disinterested in the other member's explanation. This is an example of what type of communication?

A) Content communication
B) Latent communication
C) Manifest communication
D) Indirect communication

8. In group, Rosario talks about how stressful and important her job is. Debbie comments that Rosario seems to think she is “better than the rest of us.” Another member rushes to defend
Rosario and says she does not understand why everyone wants to “tear Rosario apart.” This dynamic illustrates what phenomenon?

A) Content communication
B) Group process
C) Transference
D) Countertransference

9. The nurses on a psychiatric unit are informed that their manager will be leaving for a few weeks because she requires medical care. The manager typically makes the schedule, fills in if needed, and handles all conflicts or unit difficulties. The nurse administrator calls a meeting of the staff nurses and asks them to come up with a plan for how to handle the unit in the manager's absence. Which of the following group reactions suggests that the group is in the mature stage of development?

A) The nurses discuss various options. Although there is conflict, everyone tries to cooperate.
B) The nurses are unsure how to proceed and ask their manager what she would like them to do.
C) The nurses are upset about their manager's illness and the consequences of it but are supportive. Initially, they feel disorganized but then begin developing a plan.
D) The nurses begin trying to problem solve. They realize they cannot reach a decision on how to proceed and inform the nurse administrator.

10. A group of nursing students have been assigned the task of teaching a module on mental health assessment during their problem-based learning class. Which of the following actions reflects group development in the initial stage?

A) Evaluating the group experience
B) Developing models for cooperation
C) Engaging in conflicts and resolving them efficiently
D) Seeking similarities among the group members

Chapter 15- Families and Family Interventions

1. A teenage girl has been admitted to a residential treatment facility because of anorexia nervosa. Her parents agree to tell people that she is attending a boarding school for the remainder of the semester. What is this agreement an example of?

A) Pathology
B) Interdependency
C) A family boundary
D) Carrying out family roles

2. A woman has completed treatment for alcohol addiction. As part of the woman's therapy, her husband and daughter have joined her in a family therapy program. According to family systems theory, this action is taken because:
A) The family needs to focus on helping the mother until equilibrium is regained
B) The dynamics of the entire family will continue to shift to accommodate a change
C) The family likely has unresolved issues toward the mother
D) The family needs to learn the signs of relapse

3. The nurse therapist is working with a family on goal setting. One goal that is suggested is for the family to adopt a healthy family structure. Which of the following would be the most appropriate outcome indicator for this goal?
   A) Family conflict is avoided.
   B) Family members are protected from external conflict.
   C) Family appears to function in harmony.
   D) Conflicts are resolved in a rational manner.

4. A middle-aged woman with a busy family life has been diagnosed with a chronic illness. The family has received support from their relatives and the woman and her husband have joined a community support group. These relationships will help the family achieve what?
   A) Adjustment
   B) Adaptation
   C) Perception change
   D) First order change

5. An APRN-PMH is working with a college student who has been exhibiting mild but unprecedented signs of psychosis. Knowing the relationship between mental illness and family history, the nurse uses which tool to assess for a possible inheritance-based cause of mental illness?
   A) The CFMA Scale
   B) Genogram
   C) Ecomap
   D) Mental status exam

6. A nurse is performing a family assessment and wished to explore the family's interactions with the agencies and groups in the larger community. Which assessment will best allow the nurse to explore this interaction?
   A) Genogram
   B) Ecomap
   C) Developmental assessment
   D) Functional assessment
7. Cory is a 14-year-old boy who has a long history of skipping school and is now starting to experiment with drugs. The family assessment reveals that his parents put no restrictions on him at home, including no curfew and no household responsibilities. When asked about his beliefs about parenting roles, the father replies, “I raised myself and I turned out okay. I’m not going to do anything different for my boy. He’ll be all right.” Which stage of change, according to Prochaska, is Cory's father most likely in?
   A) Precontemplation
   B) Contemplation
   C) Preparation
   D) Action

8. A nurse therapist is working with a young woman who was the victim of a sexual assault several weeks ago. Which of the following statements to the woman and her boyfriend would constitute an affective intervention?
   A) “Your relationship will be even stronger if you can successfully work thorough this trauma.”
   B) “When either of you start to feel your anxiety build, practice slow, deep breathing until you feel more relaxed.”
   C) “I can see this is very difficult. How do you each feel when you are together intimately?”
   D) “What would you think about joining a support group to provide you with some more assistance?”

9. The nurse is working with a family who has indicated a desire to solve conflict more effectively. In response, the nurse role-plays relevant communication techniques with each family member. This is an example of which type of family intervention?
   A) Cognitive
   B) Affective
   C) Behavioral
   D) Advocacy

10. A man with young children is having difficulty managing the shopping, cooking, and laundry for his children while his wife receives inpatient treatment for depression. This man's burden is an example of what?
    A) Iatrogenic burden
    B) Subjective burden
    C) Objective burden
    D) Instrumental burden

Chapter 16- Psychopharmacology
1. A client's mental illness is being treated with a drug regimen that includes a receptor agonist. A drug that is an agonist has what function?
   A) Inhibits cell function by occupying receptor sites
   B) Binds to a receptor and causes a change in cellular function
   C) Destroys cellular receptor sites to achieve therapeutic effect
   D) Stabilizes a receptor in an inactive state

2. The nurse has administered a scheduled dose of an antagonist to a client with mental illness. This drug will achieve a therapeutic effect by:
   A) Preventing substances from activating cell function
   B) Reducing the client's number of synapses
   C) Accelerating the reuptake of neurotransmitters
   D) Stabilizing a receptor in an inactive state

3. A client has been taking antidepressants for 2 years. He tells the nurse that his medication no longer seems to be working despite the fact that he ensures that he never misses a dose. What phenomenon could account this client's claim?
   A) Refractoriness
   B) Efficacy
   C) Affinity
   D) Noncompliance

4. An adult client with severe depression has been taking a tricyclic antidepressant for several years with reasonable success. However, the client has had to learn to manage some of the side effects that are characteristic of this drug. What mechanism causes the side effects of tricyclic antidepressants?
   A) Blockade of acetylcholine
   B) Inhibition of reuptake of norepinephrine
   C) Inhibition of reuptake of serotonin
   D) Blockade of gamma-aminobutyric acid (GABA)

5. A client has been severely depressed for several months and has failed to respond appreciably to treatment with selective serotonin reuptake inhibitors (SSRIs). As a result, his psychiatrist has begun a course of monoamine oxidase inhibitors (MAOIs). The care team has been careful to monitor for what adverse effect related to excess tyramine?
   A) Increased agitation
   B) Hypertensive crises
   C) Serotonin syndrome
   D) Tardive dyskinesia
6. A client is being treated for depression with a selective serotonin reuptake inhibitor (SSRI). The nurse should prioritize assessments related to what adverse effect?
   A) Exophthalmia  
   B) Sexual dysfunction  
   C) Liver failure  
   D) Myopathy

7. A client begins taking 40 mg of fluoxetine (Prozac) daily. Two days later the client calls complaining of restlessness. In response to the prescriber's orders, which of the following interventions should the nurse expect to implement?
   A) Add diazepam (Valium).  
   B) Decrease the dosage.  
   C) Switch to a different selective serotonin reuptake inhibitor (SSRI).  
   D) Stop the fluoxetine and tell the client to go to a nearby hospital for observation and blood studies.

8. A 28-year-old client is being treated with lithium carbonate for bipolar disorder. Which of the following factors will increase his risk for lithium toxicity?
   A) The client works in a paint factory.  
   B) The client eats cheeses and smoked meats.  
   C) The client drinks caffeinated beverages.  
   D) The client works out at the gym vigorously.

9. A 21-year-old client has been diagnosed with bipolar disorder and has begun treatment with lithium carbonate. The nurse has taught the client about the importance of having the requisite blood samples drawn at the scheduled times to monitor blood levels of the drug. What is the therapeutic level of lithium?
   A) 1 to 1.5 mEq/L  
   B) 1.5 to 2 mEq/L  
   C) 2 to 2.5 mEq/L  
   D) 2.5 to 3 mEq/L

10. A client has been diagnosed with generalized anxiety disorder and an appropriate medication regimen is being created. Which of the following statements comparing buspirone to benzodiazepines is accurate?
    A) Buspirone does not cause drowsiness.  
    B) Buspirone is associated with dependence and addiction.  
    C) Benzodiazepines have no muscle-relaxing properties.  
    D) Benzodiazepines are ineffective in the treatment of alcohol withdrawal.
Chapter 17- Integrative Therapies

1. A patient's spouse has raised the possibility of integrating alternative therapies into the patient's treatment regimen. The term “alternative therapy” refers to which of the following?
   A) Herbal remedies not generally used in Western therapies
   B) Therapies used without the direct involvement of health care practitioners
   C) Traditional treatments that lack evidence for their efficacy
   D) Health care practices used in place of Western therapies

2. A patient has informed the nurse that he has been conducting online research into complementary therapies for the treatment of his depression. Which of the following factors has most led to the increased use of complementary and alternative medicine?
   A) Dissatisfaction with Western medicine
   B) Low cost
   C) Poor coordination of traditional health care services
   D) Documented efficacy

3. The National Center for Complementary and Alternative Medicine considers modalities that focus on the manipulation or movement of the musculoskeletal system as which of the following?
   A) Mind–body medicine
   B) Biologically based practice
   C) Manipulative and body-based practice
   D) Energy medicine

4. A patient is concurrently using pharmacological therapies and acupuncture for the treatment of bipolar disorder. This approach to treatment is called:
   A) Alternative therapy
   B) Integrative therapy
   C) Western therapy
   D) Allopathic therapy

5. Which of the following complementary and alternative medicine therapies is based on the concept that illness can be treated with minute quantities of substances that cause the same symptoms?
   A) Craniosacral therapy
   B) Homeopathy
   C) Ayurvedic medicine
   D) Reflexology
6. A patient has told the nurse that he performs exercises in order to re-center his vital life force. What is the traditional Chinese concept that underlies this activity?
   A) Yin and yang
   B) Chakra
   C) Meridian
   D) Qi

7. The nurse is caring for a client who suffers from anxiety. The client informs the nurse that he has been taking the herb kava. The nurse should be aware that kava carries the potential for which of the following?
   A) Liver damage
   B) Renal failure
   C) Brain damage
   D) Cardiomyopathy

8. An adult woman is seeing a nurse therapist for depression. The client has been taking fluoxetine (Prozac) for 3 weeks, but her mood has not improved. She states, “I need more than this to get better so I'm taking St. John's wort, too.” Why should the nurse tell the client to immediately stop taking St. John's wort?
   A) St. John's wort with fluoxetine may lead to serotonin syndrome.
   B) St. John's wort with fluoxetine may cause blood dyscrasias.
   C) St. John's wort with fluoxetine may lead to liver failure.
   D) St. John's wort with fluoxetine may lead to hypertensive crisis.

9. A nurse therapist conducts regularly scheduled meditation sessions with a group of mental health clients. Which of the following most accurately describes the practice of meditation?
   A) Obtaining a state of consciousness in which one tries to achieve awareness without thought and positively alter physiology
   B) Changing negative images to positive images to reverse states of illness or distress
   C) Becoming aware of connecting with universal (above) and earth (below) energies, balancing energies within the body
   D) Using proper breathing, movement, and postures to promote relaxation and enhance the flow of vital energy

10. A music therapist has recently been added to the interdisciplinary team that provides care on a psychiatric unit. The therapeutic effects of music therapy are believed to involve which of the following?
    A) Improved circulation as a result of physical movement influenced by the rhythm of the music
    B) Improved affect as a result of sensory stimulation by pleasant sounds
Chapter 18- Somatic Therapies

1. Somatic therapies are being considered for the treatment of a client's mental health disorder. Which of the following do somatic therapies involve?
   A) Changing dysfunctional thinking and behaviors through cognitive interventions
   B) Medications and body-based modalities
   C) The selective use of complementary and alternative treatments
   D) All therapies that exclude the use of medication

2. A nurse is performing patient education in anticipation of the client's first treatment with electroconvulsive therapy (ECT). In the process of ECT, what is electricity is used to induce?
   A) Temporary brain hypoxia
   B) Amnesia
   C) Seizure activity
   D) Neural reorganization

3. A psychiatric–mental health reads in a client's history that she was treated several years ago with electroconvulsive therapy. The nurse is justified in presuming that this client likely has a history of what mental health disorder?
   A) Schizophrenia that has not responded to medication
   B) Persistent anxiety disorders
   C) Personality disorders
   D) Major depression that has not responded to medication

4. A client is a potential candidate for electroconvulsive therapy and is in the pretreatment evaluation process. Which of the following orders should the nurse question?
   A) Obtain a complete metabolic panel and electrocardiography.
   B) Inform client to fast after midnight the day before the procedure.
   C) Obtain baseline of symptoms.
   D) Administer succinylcholine.

5. During the procedure for electroconvulsive therapy, if electrodes are applied to both temples, what is there an increased risk for?
   A) Memory loss
   B) Subdural hemorrhage
   C) Decreased oxygen saturation
D) Reactive migraine

6. Following electroconvulsive therapy several weeks, a client has experienced the continued loss of memory, especially of more recent past events. Which of the following is this known as?

A) Vascular dementia
B) Retrograde amnesia
C) Traumatic amnesia
D) Temporary Alzheimer's disease

7. The nurse has been asked to explain electroconvulsive therapy to a client and his family. Which of the following statements made by the nurse is most accurate?

A) “You will need to receive treatment twice a week for several years to prevent relapse.”
B) “A tapering schedule may be used to end your treatments to prevent rehospitalization.”
C) “If you show improvement after the treatment, your previous symptoms will not return.”
D) “The entire procedure typically lasts between 15 and 20 minutes.”

8. The nurse is caring for a client immediately after electroconvulsive therapy. What assessments should the nurse prioritize at this time?

A) Fluid and electrolyte balance
B) Cardiovascular status and airway patency
C) Cardiovascular status and memory loss
D) Pain level and blood pressure

9. A woman has noticed that in the fall and winter months she has a loss of energy, difficulty sleeping, and sadness. After seeking treatment, the client is diagnosed with seasonal affective disorder. Which of the following treatments is typically most effective for this condition?

A) MAOIs
B) SSRIs
C) Electroconvulsive therapy
D) Phototherapy

10. The nurse has been asked to provide education to a client that will be receiving light therapy. Which of the following should the nurse include in the teaching plan?

A) “You should not look directly into the light.”
B) “You should use the light for only 1 week.”
C) “You should be exposed to the light for at least 4 hours per day.”
D) “You should purchase a light box that does not contain a filter.”

Chapter 19- Inpatient Care Settings
1. Individuals who are most likely to receive inpatient mental health treatment are those who meet which of the following criteria?
   A) The individual has a coexisting medical condition that complicates treatment.
   B) The individual cannot afford housing or is unable to maintain employment.
   C) The individual has a condition that has not responded appreciably to medication.
   D) The individual poses an acute risk of harm to himself or herself or to others.

2. A homeless man who is addicted to drugs and alcohol has been brought to the emergency department by ambulance. Which of the following settings would be best for an individual in need of detoxification from drugs and alcohol?
   A) Long-term hospitalization
   B) Acute care hospital
   C) Partial hospitalization program
   D) Outpatient care

3. A 22-year-old woman has been diagnosed with bipolar disorder. She attends group therapy and participates in other organized activities for 6 hours a day and then returns home to her residence. In which of the following settings would this woman receive this type of care?
   A) Long-term hospitalization
   B) Acute care hospitalization
   C) Partial hospitalization program
   D) Psychiatric specialty unit

4. Mr. Lopez is an 84-year-old man who was diagnosed with Alzheimer's disease 18 months ago and his wife has been providing his immediate care. In recent weeks, she has come to the realization that his symptoms have worsened significantly and she is no longer able to meet his needs. To which of the following units would Mr. Lopez most likely be admitted?
   A) General psychiatric unit
   B) Psychiatric specialty unit
   C) Nonpsychiatric unit
   D) Emergency unit

5. A patient with a longstanding diagnosis of schizophrenia has been admitted to a psychiatric-mental health facility. The patient's symptoms have escalated and he is angry, defensive, and paranoid. Which of the following is the nurse's highest priority?
   A) Ensuring client and personal safety
   B) Determining the source of the client's anger and paranoia
   C) Ensuring the client that medication will correct his problems
   D) Determining the client's willingness to be admitted
6. Which of the following statements regarding admission or discharge from a psychiatric-mental health facility is correct?

A) If an individual is admitted voluntarily, under no circumstance can the person's status be later changed to involuntary.

B) A parent or legal guardian cannot commit an individual without the individual's consent.

C) Police officers have the authority to commit an individual if they are considered dangerous to others.

D) If a client requests to leave, he or she must be discharged within 10 hours of the request.

7. An individual has been involuntarily brought to a psychiatric–mental health facility by police. The care team recognizes that there is a need to allow for time to determine an appropriate diagnosis. What is this type of involuntary commitment known as?

A) Acute

B) Observational

C) Speculative

D) Outpatient

8. Changes have been made to the organizational structure and facilities of a psychiatric unit in order to create an environment that is more therapeutic. Which of the following is the main goal of a therapeutic environment?

A) Encourage optimal daily functioning for patients.

B) Encourage the development of patients' self-control.

C) Encourage rapport between patients and staff.

D) Encourage movement toward dependent living.

9. Sarah is a 26-year-old woman who is being admitted to an inpatient psychiatric–mental health facility. During the admission process, she has been asked to sign a contract. Which of the following is a common contract in inpatient settings?

A) Medication compliance contract

B) Self-improvement contract

C) Truth-telling contract

D) No self-harm contract

10. A nurse provides care in a psychiatric–mental health facility that uses traditional milieu therapy. Which of the following stages of milieu therapy involved providing basic needs of food, shelter, safety, and security?

A) Physiology

B) Structure

C) Containment

D) Support
Chapter 20- Community and Home Psychiatric Care

1. A psychiatric–mental health nurse is participating in a health promotion campaign with the expressed goal of reducing the incidence of new psychiatric disorders and disabilities in the community. This activity represents what level of prevention?
   A) Primary
   B) Secondary
   C) Tertiary
   D) Interventional

2. Community mental health nurses have been mobilized to provide crisis intervention for the students at a school where a mass murder just occurred. What type of prevention strategy is this?
   A) Primary
   B) Secondary
   C) Tertiary
   D) Interventional

3. Which of the following interventions represents tertiary prevention for mental illness?
   A) Providing crisis intervention after a hurricane
   B) Leading a self-help group for adults with a history of alcohol abuse
   C) Screening the residents of a community for depression
   D) Educating adolescents about substance abuse

4. A mental health nurse has relocated to a remote, rural community and is assessing the community support systems that exist. Which of the following statements best defines a community support system as related to mental illness?
   A) A community support system is an organized system of group housing arrangements designed to support the deinstitutionalization of the mentally ill.
   B) A community support system is a network that helps to meet the needs of people with mental illness and to realize their potential without unnecessary isolation.
   C) A community support system is a network of 12-step programs and support groups.
   D) A community support system is a system of interventions designed to affect macrosystem variables that discriminate against people with mental illness.

5. A psychiatric–mental health nurse has taken action to enhance a community's support services. Which of the following statements best describes the scope of community support services?
   A) Community support services provide help with instrumental activities of daily living, such as money management, transportation, and employment opportunities.
B) Community support services provide a wide range of services, from health care and education to housing arrangements, employment counseling, and rehabilitation.

C) Community support services provide mental health counseling and medication management.

D) Community support services provide crisis intervention assistance and referral.

6. A nurse is working with a client who has severe and persistent mental illness and has been referred to a community support system. What is the basic philosophy behind community support systems?
   A) To address the needs to adults with mental illness and increase their ability to function
   B) To teach the community about mental illness to prevent stigma
   C) To ensure that clients comply with their medication regimens to prevent relapse
   D) To increase the efficiency of treatment for persons with mental illness

7. A nurse has put a new client in contact with some of the community support service programs that exist in the community. What goal should the nurse prioritize when planning this aspect of the client's care?
   A) The client's functional ability will improve.
   B) The client will gain insight into the causes of his mental illness.
   C) The client will experience fewer symptoms.
   D) The client will refrain from aberrant behavior.

8. An experienced psychiatric–mental health nurse has begun a new role as a case manager. In this role, the nurse will most likely do which of the following?
   A) Visit clients' homes and provide mental health care interventions as needed
   B) Provide mental health counseling and prescribe appropriate medications
   C) Ensure that clients are complying with orders written by a health care provider
   D) Help clients make informed choices and ensure timely access to needed assistance

9. A nurse is a member of the committee that oversees a program that directly provides comprehensive, individualized consumer services to those with severe and persistent mental illness. What service delivery model does this describe?
   A) Fairweather treatment
   B) Clubhouse treatment
   C) Assertive community treatment
   D) Community living treatment

10. A consultant has been hired to assist with a rehabilitation model that helps clients with the operation of a small business. What model does this activity exemplify?
    A) Consumer-run alternative model
B) Fairweather Lodge model
C) Community living model
D) Community worker model