

Final examination
Psychiatric and Mental Health Nursing
2nd year students
2019 / 2020
دور سبتمبر

Date: 11-9-2020

Time: 2 hours

Number of exam pages: - 9 pages (Including coversheet)

Course Title:	Psychiatric and Mental Health Nursing
Academic year:-	2020-2019
Semester:	September
Day	11-9-2020
Time:	3 Hours
Number of exam paper:	9 (Including cover sheet)

Parts	Questions	Examination Marks	Student's marks
Part 1	Multiple choice questions	100	
Part II	True & false	50	
Total		150	

Please answer all of the following questions:-

Part I:- Multiple choice questions: (100 Marks)

Read the following statements and encircle the correct answer. There is only one best answer:-

1-- Patient who refuses to eat his meal stating that the food is poisoned is an example of:-

- A. Delusion
- B. Hallucination
- C. Suicidal idea
- D. Negativism

2- According to Erikson's psychosocial stages of development , the personal crisis in which a child needs to learn important academic skills and compare favorably with peers in school to achieve competence is

- a. Trust versus mistrust.
- b. Initiative versus guilt.
- c. Identity versus role confusion.
- d. Industry versus inferiority.

3- Nurse Mona is teaching her students about anxiety medications, she explains that Buspirone is indicated in the following case:-

- A. Prior to operation
- B. Generalized anxiety disorder
- C. Sedation
- D. Muscle relaxant

4- - As defined by Freud, the ego is that part of the mind that contain;

- a- The basic instincts and urges
- b- The conscience
- c- The ability to respond to the realities of everyday life.
- d- All elements of the holistic person

5-Which of the following interventions is important for a client experienced hallucination and delusion and taking antipsychotic?

- A. Explain effects of serotonin syndrome
- B. Teach the client to watch for extrapyramidal adverse reactions
- C. Explain that the drug is less effective
- D. Discuss the need to report paradoxical effects such as euphoria

6 - A man who is late for work states, “my wife forgot to set the alarm last night so I over slept. This example of:

- a- Introjections
- b- Regression
- a-Projection
- d-Rationalization.

6- Initiation phase of relation is characterized by all of the following except:

- a- High level of anxiety
- b- Patient dependent on himself
- c- Patient feel trust & confidence
- d- Lack of knowledge.

7- Which of the following examples best illustrates a delusion of reference?

- A. The government is plotting to steal my things
- B. The night shift nurse doesn't like me
- C. The news announcer on TV is talking about me
- D. The food is being poisoned

8- A patient diagnosed with obsessive-compulsive disorder (OCD) continually carries a toothbrush, and will brush and floss up to fifty times each day. The healthcare provider understands that the patient's behavior is an attempt to accomplish which of the following?

- A. Avoid interacting with others.
- B. Promote oral health.
- C-Relieve anxiety.
- D-Experience pleasure.

9-When a person has both positive and negative feelings toward the same object or individual. The feelings are referred to as:-

- A. Apathetic
- B. Ambivalence
- C. Inappropriate
- D. Autistic

10- The main defense mechanism used by the alcoholic (addict) is:-

- a- Denial
- b-Compensation
- b- Sublimation
- d-Reaction Formation

11-Physical exhaustion and even death in mania may be related to:-

- A. Hyperactivity and the lack of sleep.
- B. Lack of sleep and hypoactivity .
- C. Flight of idea
- D. Delirium

12- Slamming a door instead of hitting a person, yelling at your spouse after an argument with your boss. This defense mechanism is called:-

- A. Displacement
- B. Identification
- C. Undoing
- D. Introjections

13- Conscious exclusion of an unacceptable thoughts and feeling from conscious awareness. This mechanism is called:-

- A. Suppression.
- B. Compensation
- C. Regression
- D. Rationalization

14 - In assessing thought process in mania nurse should assess:

- A. Flight of ideas.
- B. Pressure of speech.
- C. Talking often includes joking, playing on words (puns) and teasing.

D. All the above.

15-Repeating the person said in nearly the same words he has used. This named communication skill of:

- A. Active listening.
- B. Interpretation.
- C. Validating
- D. Restatement.

16-Which of the following are considered to be negative signs of schizophrenia?

- A. Delusion
- B. Disorganized behaviors
- C. Hallucination
- D. Anhedonia

17-Which of the following client behaviors documented would validate the nursing diagnosis of Risk for other-directed violence?

- A- Client s description of being endowed with superpowers.
- B-Frequent angry outburst noted toward others.
- C-Refusal to eat hospital food.
- D-Refusal to join in group activities.

18- An appropriate nursing diagnosis of a client with a major depression is:

- A. Alteration in activity
- B. Alteration in thought
- C. Alteration in mood
- D. Alteration in social interaction

19- Etiology of schizophrenia is best described by;

- a. Structural and biological factors
- b. Environmental factors and poor parenting
- c. Genetic due to faulty dopamine receptors
- d. Combinations of biological psychological and environmental factors

20-Milieu therapy means:

- A. Treatment of patient's family.
- B. Put patient in carefully designed environment.
- C. Drug administration.
- D. Put patient in fresh air.

21- Maha is pacing and complains of tension and inability to set still. The nurse asks the client if something upsetting happened, and Maha's response is vague and not focused on the question. The nurse assesses Maha's condition as:

- A. Waxy flexibility.
- B. Mannerism.
- C. Restless.
- D. Negativism

22 According to psychoanalytical theory, problems with excessive orderliness and neatness arise in one of the following development stages:

- a- Oral
- c Phallic

- b- Anal
- d- Genital

23- To establish open and trusting relationship with client who has been hospitalized with severe anxiety, the nurse in charge should;

- a- Encourage the staff to have frequent interaction with the client
- b- Share an activity with the client
- c- Give client feedback about behavior
- d- Respect client's need for personal space

24- - The nurse assessing a patient with a somatoform disorder will probably note that the patient.

- a-Verbalizes emotional needs easily.
- b-Denies the need for anxiolytic drugs.
- c-Assumes increasing responsibilities within the family
- d-Misinterprets physical symptoms

25 - Monotonous repetition of certain movement or speech without purpose is termed :-

- A. Stereotypy
- C Echopraxia.
- B. Mannerism
- D. Impulsiveness.

26- Common nursing diagnosis of dissociative disorder:

- a- Altered perception process
- b- Ineffective individual coping
- c- Self care deficit
- d- Lack of knowledge.

27- Patients who abuse alcohol may become tremulous and have hallucination when they stop drinking. This is called:

- a-Tolerance
- c- Withdrawal symptom.
- b- Abstinence.
- d- Dementia

28- Suicide is most likely to occur:

- a-On admission
- c-As the depression deepens.
- b-On discharge.
- d- As the antidepressant work.

29- A nurse is assessing a client diagnosed with dependent personality disorder. Which of the following characteristics is a major component to this disorder?

- a. Abrasive to others.
- c. Indifferent to others
- b- Manipulative of others
- d. Over reliance on others.

30- People who abuse alcohol have difficulty absorbing vitamins and have lower levels of:

- a. Calcium.
- b. B12
- c. Iron
- d. Thiamine.

31-"Can you express your feelings toward your achievement in the group therapy today?" what kind of questioning is?

- a. Open ended.
- b. Closed ended

- c. Minimal encouragement.
- d. Empathy.

32- When the individual is unable to recognize everyday objects and name them correctly, this is known

- a. Apraxia.
- b. Anomia .
- c. Agnosia.
- d. Aphasia.

33- I know I am human, but I don't know who this body belongs to..."

- a. Derealization .
- b. Depersonalization .
- c. Dissociative amnesia.
- d. Dissociative identity disorder.

34- The ability of the individual to be independent and to make his own decision without external influence and to behave according to his value system means .

- a-Integrative capacity
- b-Emotional maturity
- c-Autonomous behavior
- d- Self-awareness

35- Fluctuating level of consciousness is seen in:

- A. Hysteria
- B. Delirium
- C. Dementia
- D. Mania

36- In establishing a therapeutic relationship, the focus of interaction is....

- A. Task
- B. Nurse
- C. Patient
- D. Equipment

37- A nurse assesses a confused older adult. The nurse experiences sadness and reflects, "The patient is like one of my grandparents...so helpless." Which response is the nurse demonstrating?

- a. Transference
- b. Catastrophic reaction
- c. Countertransference
- d. Defensive coping reaction

38- During which phase of the nurse-patient relationship can the nurse anticipate that identified patient issues will be explored and resolved?

- a. Preorientation
- b. Working
- c. Orientation
- d. Termination.

39- A nurse wants to demonstrate genuineness with a patient diagnosed with schizophrenia. The nurse should:

- a. Restate what the patient says.
- b. Use congruent communication strategies.
- c. Use self-revelation in patient interactions.
- d. Consistently interpret the patient's behaviors.

40- When working with a male client suffering phobia about black cats, Nurse Trish should anticipate that a problem for this client would be?

- A. Anxiety when discussing phobia

B. Anger toward the feared object

C. Denying that the phobia exist

D. Distortion of reality when completing daily routines)

41- Bipolar disorder includes manic episodes followed by...

a-Depressive episodes

b-Crime sprees

c-Lying

d-Sleep waking

42- Conjunctival injection is a specific intoxication symptoms of :-

A-Herion

B-Tramadol

C-Cannabis

D-Inhalants

43- Which are the following activities would be most appropriate for a client with mania on an inpatient unit?

a-Arts and crafts

b-Playing a game of cards

c-Walking with a staff member

d-A cooking group

44-- Voluntary hospitalization characterized by:-

A- The admission occurs through written application by the patient or the patient's guardian

B-Patient admission is necessary when patient is a danger to himself or others.

C-Patient is hospitalized for specific period to prevent dangerous behavior.

D-Patient is admitted through judicial action.

45- Which is the priority nursing diagnosis used with border line personality disorder:

a- Risk for self-mutilation__

b- Ineffective

coping

c- Social isolation

d-self

care deficit

46- The distance between the sender and the receiver is called.

a-Gait

c-Head nodding

b-Proxemics

d-Finger

pointing

47--)......is the complex of mental characteristics that makes each of us unique from other people

- A-Heredity
- C-Personality

- B-Emotional tone
- D-Sexuality

48- The ability to think abstractly and to plan, initiate, sequence, monitor, and stop complex behavior means.

- A-Disturbance in executive functioning
- B-Disturbance in emotional functioning
- C-Disturbance in motor functioning
- D-Disturbance in physiological functioning

49- False sensory perception in the presence of real external stimuli is called:-

- a. Depersonalization
- b. Hallucination
- c. De Ja vu
- d. Illusion.

50- A nurse instructs a patient taking a drug that inhibits monoamine oxidase (MAO) to avoid certain foods and drugs because of the risk of:

- A-Hypotensive shock
- B-Hypertensive crisis.
- C- Cardiac dysrhythmia
- D- Cardiogenic shock.

Part II- True and False questions; 50 marks:

Read each statement carefully and encircle "T" if the statement is true, encircle "F" if the statement is false.

Statement	True	False
1- Non- verbal communication is considered a more accurate description of true feeling		

2- People with bipolar disorder go through usual mood changes.		
3- All behavior is meaningful, is caused and explained.		
4-Anergia is inability to find meaning or pleasure in existence		
5- Mental health means the absence of mental illness		
6- During the depersonalization or derealization experiences, reality testing is lost		
7- A comprehensive community mental health center includes in-patient services.		
8-- Termination phase of nurse patient relationship may create feeling of rejection , depression , and anxiety in patient		
9- Nurse must listen to patient's problem without showing surprise or disapproval		
10- Patients with somatic disorders have no insight into their behaviors.		
11- Fidelity is defined as an obligation to remain faithful to one's commitment		
12- Primary prevention includes treatment and rehabilitation services for those persons who have had diagnosed psychiatric illness		
13- Ego is The rationality - reason, logic, and common sense - that we use to tame our instinctual urges.		
14- Intentional tort of patient include assault and battery		
15-- Patients with somatic disorders have no insight into their behaviors.		
16- Everyone has basic needs that are not interrelated and can be separated		

17-Judical discharge requires outpatient treatment for a specific period of time		
18- To recover from anxiety disorders, you have to face situations that provoke your anxiety		
19- I wouldn't talk about it right now " . "Let's talk about my accident later is example of projection		
20- Delirium is a syndrome associated with destruction of brain cell		
21- -- Lack of agreement and consistency between the staff gives rise to more aggressive behavior between the patients		
22- False fixed belief not accepted by the person in the same social stander means delusion		
23- Grief is the normal response to a significant loss		
24- Phobia is characterized by marked reasonable fear related to the presence or anticipation of specific object or situation.		
25- Hospitalization is not indicated with Mania		

GOOD LUCK