

نموذج استرشادي للأسئلة لامتحان مادة تمريض الصحة النفسية
الفرقة الثانية بالمعهد الفني للتمريض

MCQ : (40 marks)

1- The most important nursing diagnosis in patient who has mania is:

- a. High risk of violence**
- b. Sensory perceptual alteration
- c. Sleep pattern disturbances
- d. Defensive coping

2- 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. Inappropriateness
- d. Autistic thinking

3- On caring of hallucinating patient the nurse should:

- a. Tell him to stop it
- b. Put him in quiet room
- c. Keep him busy in a stimulating activity**
- d. Avoid interrupting his hallucination

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

- a. The FBI is plotting to steal my invention
- 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

5- Patient was frightened by what he thought a rat .It was a grey socks. This example of:

- a. Delusion
- b. Hallucination
- c. Illusion**
- d. Anxiety

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

- a. Delusion**
- b. Hallucination
- c. Suicidal idea
- d. Negativism

7- False sensory perception of the real external stimuli is called:

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

8- The patient believes that his thoughts are taken out of his mind, this is an example of:

- a. Thought insertion
- b. Delusion of reference
- c. Thought withdrawal**
- d. Delusion of persecution

9- To calm down a manic patient, it is helpful to:

- a. Restrain the patient
- b. Share him in activities until he is exhausted
- c. Reduce external stimuli to a minimum**
- d. Provide for a stimulating environment

10- The most common affect of manic patient is:

- a. Inappropriate
- b. Blunted
- c. Euphoria**
- d. Irritability

11- When the patient believes that somebody trying to do harm to him, this is called:

- a. Delusion of grandeur
- b. Delusion of reference
- c. Delusion of influence
- d. Delusion of persecution**

12- Means of showing acceptance are the following except one:

- a. Be judgmental and punitive**
- b. Show interest in the patient as a person
- c. Talk with a purpose
- d. Permit patient to express strongly held feelings

13- All of the following situations the staff must be consistent except one:

- a. In showing punishment.**
- b. In giving reassurance and support.
- c. Setting limits.
- d. Attitudes of the staff

14- If force needs to be used with the patient, the nurse should make the following except:

- a. Carry out the procedure quickly and firmly
- b. Anger or annoyance should be shown.**
- c. No verbal comments should be made during the procedure.
- d. Never let the patient feel that he is being punished.

15-It' is a rule that guides ones action. That is mean:

- a. Attitudes of the staff
- b. A principle**
- c. Acceptance
- d. Consistency

16- Showing the interest to the patient as a method of conveying acceptance can be done through :

- a. Be non-punitive to the patient.
- b. Seeking out a patient.**
- c. Conveying empathetic understanding.
- d-None of the above.

17- All of us need reassurance occasionally, the psychiatric patient need it constantly, one of the most important methods of giving reassurance is:

- a. Allow him to be sick as he or she need.**
- b. Develop mutual trust.
- c. Be consistent with the patient.
- d. Active listening.

18- Which one is considered a false reassurance?

- a. Yes, uh-huh "I follow what you say.
- b. I would like to spend time with you.
- c. Go on "And then? Tell me about it.
- d. You are nice person.**

19- Reassurance should be given through:

- a. Be truly interested in patient problems**
- b. Defining the limitation placed on patient

- c. Routine in a psychiatric hospital
- d. Patient's behavior

20- Through which the following can the nurse understand herself better?

- a. **Exchange personal experience freely and frankly with her colleagues.**
- b. Permit patient to express strongly held feelings
- c. Nurse's conversation with a patient must have a goal
- d. Avoiding subjects on which he feels sensitive

21- Mental illness refers to:

- a- Individual realizes his/her own abilities.
- b- Individual can cope with normal stresses of life.
- c- Individual can work productively.
- d- Individual is unable to make a contribution to his or her community.**

22- Integration is means:

- a- The ability of the person to plan for his future.
- b- It's a balance between what is expressed and what is repressed.**
- c- A person must have some objectivity about the self.
- d- None of the above.

23- One from the following is not involves the autonomy:

- a- Self-determination.
- b- A balance between dependence and independence.
- c- Acceptance of self and self-awareness.**
- d- Acceptance of the consequences of one's actions.

24- The mentally ill individuals are:

- a- Exhibit dependency needs because of feelings of inadequacy.**
- b- Are optimistic.
- c- Accept responsibility for actions.

d- Are able to cope with stress.

25- The mentally health individuals are:

a- Display poor judgment.

b- Exhibits maladaptive behavior.

c- Feel inadequate.

d- Recognize limitations.

26- Environmental factors of mental illness involve:

a- **Dysfunctional family life.**

b- Anxiety, loneliness and feelings of inadequacy.

c- Brain chemistry.

d- Brain injury or defects.

27- Relationship between mother and her kids is an example of:

a- Therapeutic relationship.

b- Social relationship.

c- Intimate relationship.

d- Scholar relationship.

28- Which of the following is related to primary prevention?

a- **Teach parenting skills and normal child development expectation pregnant couples.**

b- Provide family support and education to assist in early identification of symptoms.

c- Treat individual in any psychiatric setting.

d- Refer clients who demonstrate symptoms to other appropriate mental health care providers.

29- It refers to feeling of confidence in building a relation with other:

a- Acceptance.

b- Sympathy.

c- Trust.

d- Successful communication.

30- Which of the following is not characteristic of orientation phase?

a- Lack of trust.

b- Lack of knowledge.

c- High level of anxiety.

d- High level of independency.

31- Which of the following is including therapeutic relationship?

a- Give and receive equally.

b- Randomly discuss topics at will or whim.

c- Actively listen and use communication techniques.

d- Become subjectively involved.

32- Mr. A. is a 40-year- old, admitted to Psychiatric department, he had exhibited strange behavior for several months. He accused his wife of poisoning his food, having an affair with his boss.

Q1: What is the most important nursing diagnosis for Mr. A?

a- Altered thought process

b- Sensory perceptual alteration

c- Social isolation

E. Health maintenance deficit.

Q2: What is the best Communication technique used with Mr. A ?

a- Giving broad opening.

b- Voicing doubt.

c- Focusing.

d- Encouraging comparison.

33- A 25years old patient experiencing disturbed thought process believes that his food is being poisoned. Which types of delusion it indicate?

- a- Delusion of persecution
- b- Delusion of reference
- c- Delusion of grandiosity
- d- Erotomaniac Delusion.

34-Anhedonia is:

- a- **loss of interest in and withdrawal from all regular pleasurable activities.**
- b- Unpleasant mood.
- c- Feeling of sadness appropriate to real loss.
- d- Intense elation with feeling of grandeur.

35- Which of the following is false sensory perception not associated with real external stimuli?

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

36- Concentrates attention on a single point, this means:

- a- Exploring.
- b- Reflecting.
- c- Focusing.**
- d- Presenting reality.

37- Barrier of communication at the level of receiver is:

- a- Does not formulate clearly the objectives.
- b- Does not adapt the tone of voice.
- c- Poor listening condition.**
- d- Not accessible to the receptor.

38-It's the message or response, which returned by the receiver:

- a- Referent.
- b- Message.
- c- Feedback.**
- d- Pacing.

39-While you make assessment for the patient at the outpatient clinic, and you did not understand anything, this means:

- a- Flight of ideas.
- b- Confabulation.
- c- Incoherence.**
- d- Blocking.

40-The nurse interprets a patient's fear of being in situations or places that may be difficult or embarrassing to leave as evidence of:-

- a. Social phobia.**
- b. Panic disorder.
- c. Agoraphobia.
- d. Generalized anxiety disorder.

T &F questions: (30 marks)

1-People who can carry out their roles in society and whose behavior is inappropriate are viewed as healthy.	T	<u>F</u>
2-Mental health is the adjustment of human beings to each other and to the world around them with minimum of effectiveness and happiness.	T	<u>F</u>
3-A healthy person must also have a sense of identity, wholeness, belongingness and security.	<u>T</u>	F
4-Positive attitudes toward the individual self include an acceptance of self and self-awareness.	<u>T</u>	F
5-The mentally healthy person can't change his perceptions about the world in the light of new information.	T	<u>F</u>
6-Environmental mastery enables a mentally healthy person to feel success in an approved role in personal society or group.	<u>T</u>	F
7-Secondary prevention focuses on reduction of the incidence of mental disorders.	T	<u>F</u>
8-Contract is an agreement between the nurse and patient to accomplish a clearly stated goal.	<u>T</u>	F
9-Anxiety is a clearly identifiable feeling of dread or apprehension.	T	<u>F</u>
10- Illusion is a false fixed belief, based on incorrect inference about external reality that cannot be corrected by logic.	T	<u>F</u>
11- Word salad is a rapid shifting from one topic to another.	T	<u>F</u>
12- Mood is a pervasive and sustained emotion subjectively experienced and reported by a patient.	<u>T</u>	F
13- Patient should not be accepted exactly as he is.	T	<u>F</u>
14- Nursing care should not be centered on the patient as a person.	T	<u>F</u>
15- Reassurance must be given in a suitable and acceptable manner.	<u>T</u>	F

16- Self-understanding should be used as a therapeutic tool.	<u>T</u>	F
17- Giving recognition indicates awareness of change and personal efforts.	<u>T</u>	F
18- The social structure of the ward unit should be organized to promote patients' social participation.	<u>T</u>	F
19- Verbal communication is considering more accurate description of emotion than nonverbal message.	T	<u>F</u>
20- The face is the most expressive part of the body.	<u>T</u>	F
21- Provide climate of trust and confidence improve communication process.	<u>T</u>	F
22- Climate and time are internal factors which affect good communication.	T	<u>F</u>
23- Unnecessary increase of the patients' anxiety should be avoided.	<u>T</u>	F
24- Euphoria is defined as inability or difficulty in describing or being aware of one's emotions or mood.	T	<u>F</u>
25- Apathy is dulled emotional tone associated with detachment or indifference.	<u>T</u>	F
26- Staff behavior often mirrors patient's behavior and vice versa it means confidentiality.	T	<u>F</u>
27- The focus of therapeutic relationship is on the patient's needs.	<u>T</u>	F
28- Bipolar disorder is the patient with only major depressive episode.	T	<u>F</u>
29- Staff should maintain and convey a calm attitude toward violent patient.	<u>T</u>	F
30- ECT is contraindicated in patient with uncompensated congestive heart failure.	<u>T</u>	F

Good Luck