



Psychiatric Nursing Department

Model answer Quiz no 2(A) of Psychiatric Nursing Fourth year

<u>Date: 11/12/2021</u> Time: 20 minutes

Part I, Multiple choice questions: : (5marks one for each question)

Mrs. J. is an elderly client diagnosed with Alzheimer's disease. She becomes agitated and combative when a nurse approaches to help with morning care.

The most appropriate nursing intervention in this situation would be to:

- A. Tell the client firmly that it is time to get dressed.
- B.Obtain assistance to restrain the client for safety.
- C. Remain calm and talk quietly to the client.
- D. Call the doctor and request an order for sedation.

When an individual is unaware that they present different personalities to the world this is known as?

- A. Misappropriate identity disorders
- **B. Dissociative identity disorders**
- C. Dislocated identity disorders
- D. Dissociative amnesia

A physician describes a client as "Factitious." The nurse knows this means the client.

A. falsely claiming to have the symptoms.

- B. experiences symptoms that cannot be explained medically.
- C. experiences symptoms that have a physiological basis.
- D. is seeking medication to ease pain of psychological origin

Mr.A. who has had auditory hallucinations for many years tells Nurse S. that the voice prevents his participation in a social skills training program at the community health center. Which intervention is most appropriate?

- a. Let Mr.A. analyze the content of the voices
- b. Advise **Mr.A.**to participate in the program when the voices cease.
- c. Advice Mr.A.to take his medications as prescribed
- d. Teach Mr.A.to use thought stopping techniques

Which of the following defense mechanism used by clients with mania?

- A- Projection
- **B-** Displacement
- C- Denial
- **D-** Compensation

Which of the following are neurochemical influences associated with mania?

- A- Thyroxin
- **B- Serotonin and nor epinephrine**
- C- Adrenaline
- D- Acetylcholine

After 3 days of taking haloperidol, the client shows an inability to sit still, is restless and fidgety, and paces around the unit. Of the following extrapyramidal adverse reactions, the client is showing signs of:

- A. Dystonia.
- B. Akathisia.
- C. Parkinsonism.
- D. Tardive dyskinesia.

When planning care for a female client using ritualistic behaviour, Nurse Gina must recognize that the ritual:

- A. Helps the client focus on the inability to deal with reality
- B. Helps the client control the anxiety

C. Is under the client's conscious control

D.Is used by the client primarily for secondary gains

Which of the following is a characteristic of OCD?

- A. Presence of delusion of infidelity
- B. Denial of obsessive thoughts
- C. Presence of auditory hallucinations

D. An awareness of the senselessness of obsession

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A 34-year-old woman is admitted for treatment of depression. Which of these symptoms would the nurse be least likely to find in the initial assessment?

- A. Inability to make decisions.
- B. Feelings of hopelessness.
- C. Family history of depression.
- **D.** Increased interest in sex.

Part II:- Read the following statements and put a circle around the letter (T) if the statement is right and around (F) if the statement is wrong: (5marks one for each question)

Transition from one personality to another during DID is usually sudden and often associated with psychosocial stress.

<u>A</u> B

Catatonic behavior is a marked increase in reactivity to the environment.

A B

Labile mood change quickly to hostility in manic patient in response to limit setting

<u>A</u> B

Long history of "doctor shopping." Validate the diagnosis of hypochondriasis

<u>A</u> B

Depression is viewed as a reaction formation, denial of, or defense against to mania.

A B

When the nurse talks with the delirious patient, she must avoid face-to-face contact to increase the patient orientation with persons.

A <u>B</u>

Trilafon consider one traditional Antipsychotic drug

<u>A</u> B

Acute Dystonia: A state of abnormal muscle tension.

<u>A</u> B

A patient with OCD not realizes the irrationality of the obsession and experiences both the obsession and the compulsion as ego-dystonic (i.e., unwanted behavior.

\mathbf{A} $\mathbf{\underline{B}}$

Conversion is characterized by the persistent belief that one has a serious medical condition despite lack of evidence to prove this.

\mathbf{A} $\mathbf{\underline{B}}$

The End
Good Luck

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