

Psychiatric Nursing

Rosalyn, a 23-year-old student was admitted in Pototan Mental Health Unit for the first time. She was brought to that unit by her parents because she was not able to sleep for one week, had delusions, hallucinations, alogia, flight of ideas, apathy, anhedonia and ambivalent feelings. A diagnosis of schizophrenia was made.

- From the above symptoms of Rosalyn, which of the following are considered negative symptoms:
 - Hallucinations, delusions, flight of ideas
 - Apathy, anhedonia, alogia
 - Anhedonia, inability to sleep, delusions
 - Ambivalent feelings, flight of ideas, delusions
- Assessment of Rosalyn reveals lack of ego boundaries, which is evidenced by detachment from herself or her behavior. This is called:
 - Perseveration
 - Lack of insight
 - Disorientation
 - Depersonalization
- She was started on Chlorpromazine (Thorazine). Why is Chlorpromazine ordered?
 - To reduce extrapyramidal symptoms
 - To prevent neuroleptic malignant syndrome
 - To decrease psychotic symptoms
 - To induce sleep
- To counteract the possible extrapyramidal side effects of anti-psychotic medications. Rosalyn was given:
 - Biperiden HCl (Akineton)
 - Thiridazine (Mellaril)
 - Maprotiline (Ludiomil)
 - Fluoxetine (Prozac)
- She was having auditory hallucinations. A helpful strategy of intervention by the nurse would be:
 - Play therapy
 - Occupational therapy
 - ECT
 - Group therapy
- Rosalyn becomes extremely suspicious, the nurse should:
 - Encourage Rosalyn to do activities she likes
 - Ask Rosalyn to join other patients in the social hall
 - Help Rosalyn to learn to trust one person then gradually with others
 - Provide Rosalyn with opportunities to be with others at all time
- One caution the nurse should take in dealing with paranoid client is:
 - Don't listen to the patient because she has impaired thinking
 - Avoid laughing or talking with others when the patient can see but cannot hear what she is saying
 - Watch the client at all times to prevent suicide
 - Ignore the patient as if she doesn't exist
- The paranoid client has the tendency to present persecutory delusions of being poisoned thus she might refuse her meals. When this occur the nurse should do one of the following:
 - Leave the client alone, she will eat when she is hungry
 - Tell the client she may not leave the room until she has eaten
 - Let the client watch other clients eat their meal
 - Offer her canned food or food in shell.

9. Rosalyn verbalized: "I can feel my brain moving around my head and its' turning into a transmitter". Your diagnosis would be:
- Defensive coping related to sensory perceptual alterations
 - Social isolation related to altered thought process
 - Impaired verbal communications related to sensory perceptual alterations
 - Sensory perceptual alterations related to altered thought process
10. Which of the following statements would indicate that family teaching about schizophrenia had been effective:
- "If our daughter takes her medications properly, she won't have another psychotic episode"
 - I guess we'll have to face the fact that our daughter will eventually be institutionalized"
 - "It's a relief to find out what we did not cause our daughters schizophrenia"
 - "It is a shame our daughter will never be able to have children"
11. One of the frequent reasons for recurrence of psychotic symptoms and hospital readmission is:
- Use of alcohol
 - Failing to take medications prescribed
 - Clients do not come for check-up
 - Failure of the nurse-patient relationship

RICO, a 27-year-old male admitted to the hospital with a diagnosis of borderline personality disorder

12. Which of the following would be likely to be manifested by Rico:
- Excessive emotionality and attention seeking
 - Unstable relationships and self-image, impulsivity and self-mutilation
 - Disregard for rights of others, rules and laws
 - Preoccupation with orderliness, perfectionism, and control
13. The early experience of Rico may indicate a history of:
- Incessantly drawing attention to one's self
 - Social withdrawal and introversion
 - Early attempts at achieving independence developmentally were met with punitive response from parents
 - Purposeful cruelty to animals
14. Rico's pervasive mood is dysphoric. This is described as:
- Feelings of emptiness and happiness at the same time
 - Intense feelings of loneliness, boredom and frustration
 - Dread of social relationship with peers
 - Pervasive period of well-being and satisfaction
15. Cognitive restructuring techniques include the following except:
- | | |
|----------------------|-----------------------|
| a. Decatastrophizing | c. positive self-talk |
| b. Reframing | d. relaxation |

DENNIS, 25-year-old male was admitted to the hospital with a diagnosis of antisocial personality disorder.

16. Dennis assessment reveals a history of:
- Truancy from school, vandalism, use of drugs
 - Being very shy; has low self-esteem
 - Very orderly, strict with time schedules

- d. Submissive, dependent on parents
- 17. General appearance and motor behavior of Dennis indicate:
 - a. Normal, quite engaging and even charming
 - b. Poor hygiene soft voice
 - c. Restless, seems to be in perpetual motion
 - d. Appearing sluggish and lethargic
- 18. In the hospital, the nurse planned for the best intervention for Dennis which is:
 - a. Matter of fact approach; promote safety
 - b. Structured time, teach social skills
 - c. Limit setting, confrontation
 - d. Foster self-reliance and autonomy
- 19. Nursing diagnosis commonly used when working with clients with antisocial personality disorder include:
 - a. Altered thought process
 - b. Risk for violence
 - c. Social isolation
 - d. Risk for suicide

Carlo James, a two-year-old boy has been diagnosed to have autistic disorder:

- 20. In this diagnosis, it is expected that Carlo James would manifest the following:
 - a. Has a little eye contact, does not relate to others
 - b. Temperamental and has poor sleeping habits
 - c. Aggression to people and animals
 - d. Defiant and hostile behavior, uncooperative
- 21. The nurse when assessing for an autistic child like Carlo James should keep in mind that these following areas are affected:
 - a. Relationship, parental guidance
 - b. Communication, coping strategies
 - c. Coping strategies, motor impairment
 - d. Relationship, communication
- 22. One of the goals in the treatment for Carlo James is to:
 - a. Improve the motor skills through play
 - b. Reduce environmental stimuli like noise
 - c. Promote learning and development, especially acquisition of language skills
 - d. Diminish inattention and hyperactivity through medications
- 23. The nurse plans to have Carlo James involved in 2 daily sessions of play therapy. The main reason for this activity is that:
 - a. The nurse can motivate him through play
 - b. He will be happier when he is playing
 - c. The nurse will be more objective watching him play
 - d. He can best expressed himself through play
- 24. The doctor prescribed a medication to control tantrums, self-injury and aggressiveness. The best pharmacologic agent would be:
 - a. Haloperidol
 - b. Lithium Carbonate
 - c. Diazepam
 - d. Akineton

CECILLE, a 19-year-old student, 5' 76" and weighs 77 lbs. She is lethargic and her menstrual periods have ceased. She has lost 20 lbs, in the last 4 months. The family physician diagnosed her to have anorexia nervosa.

25. Characteristic symptoms of anorexia nervosa include the following, except:
- a. Amenorrhea
 - b. Hypotension
 - c. Interest in opposite sex
 - d. Weakness
26. A nursing diagnosis for Cecille would be:
- a. Distorted body image
 - b. Self-care deficit
 - c. Social isolation
 - d. Altered thought process
27. Which of the following is the priority intervention for Cecille:
- a. Start psychiatric treatment as soon as possible
 - b. Stabilize weight. TPN if necessary.
 - c. Provide client and family education
 - d. Help Cecille identify emotions
28. The established nutritional eating patterns for Cecille, the nurse should do the following, except:
- a. Sit with Cecille during meals and snacks
 - b. Observe her following meals and snacks for 1-2 hours
 - c. Weigh Cecille every two weeks in uniform clothing
 - d. Be alert for attempts to hide and discard food
29. Even though Cecille has been eating all her meals and snacks, her weight has remained unchanged for one week. Which of the following interventions are indicated:
- a. Supervise closely for two hours after meals and snacks
 - b. Increase daily caloric intake from 1500-2000 calories
 - c. Increase the client's fluid intake
 - d. Request an order from the physician for Prozac

LOLA REMIA, a 72 year old retired teacher. She lives with her daughter's family after her husband of 48 years died of CVA. A year ago, Lola Remia was diagnosed with dementia (Alzheimer's Disease)

30. She was noted to have deterioration of language function. This is called:
- a. Apraxia
 - b. Echolalia
 - c. Agnosia
 - d. Aphasia
31. Which of the following statement is true with Alzheimer's disease:
- a. The onset is typically abrupt, followed by rapid changes in functioning
 - b. It is progressive disease, which involves impairment in memory and orientation
 - c. It is an inherited dominant gene disease that involves cerebral atrophy
 - d. Involves disturbance of consciousness accompanied by change in cognition
32. Lola Remia is on the early stage (mild) of the disease, which of the following are the manifestation that could be observed:
- a. Forgetfulness, poor attention span
 - b. Involuntary muscle movement, shuffling gait
 - c. Wandering at night, requires assistance in ADL
 - d. Progressive memory loss
33. Lola Remia also gets confused with her environment. Which of the following will be most effective in assisting Lola Remia to maintain reality orientation
- a. Call Lola Remia by name
 - b. Encourage her to spend time watching TV in her room

- c. Plan a different schedule of activities everyday, to prevent boredom
 - d. Discourage interaction with others, as it will confuse her
34. The psychological model of care would include involving Lola Remia in the activities of daily living. This could be achieved through Reminiscence therapy which is described as:
- a. Providing emotional reassurance to the client without correcting delusions
 - b. Leaving her for short period of time, then coming back to her for interaction
 - c. Thinking about or relating personally significant experience
 - d. Providing reassurance and conveying caring through words

MRS. LACSON, 40 years old has given birth for the first time to a baby boy. Later, her son was diagnosed of having Down's syndrome. The doctor told Mr. & Mrs. Lacson that their child will be a slow learner but trainable.

35. The IQ level of trainable" retardee is: (*slow learner = 84-70; educable = 69-55; trainable = 54-40; subtrainable = 39-25; <25 profound*)
- a. 71-90
 - b. 50-70
 - c. 35-49
 - d. 20-34
36. Mrs. Lacson asks the nurse what skills her child will be able to accomplish if he is trainable:
- a. Should be able to read and write
 - b. Will be able to take care of ADL
 - c. Can find employment in skilled job
 - d. Requires care like what is provided for infants
37. Down's syndrome is considered:
- a. Chromosomal abnormality
 - b. Birth defect
 - c. psychiatric disorder
 - d. postnatal infection
38. Causative factor of mental retardation in this case is:
- a. Heredity
 - b. Early alteration of embryonic development
 - c. Medical condition of infancy
 - d. Unknown

JOHN, a 7 year old Grade I pupil was noticed by her teacher to have cigarette burns on his arms and legs. It was known that his stepfather physically abused John. As a child, John has rights, which the teacher wants to protect.

39. These rights are promulgated in: NO ANSWER (RA 679)
- a. RA 7610
 - b. RA 3370
 - c. RA 8210
 - d. RA 9350
40. John also experienced sexual abuse, which includes
- a. Name calling, blaming, screaming
 - b. Burning, biting, twisting limbs
 - c. not enrolling John in the next grade
 - d. acts of molestation
41. Begging or stealing food, poor neglect, inappropriate clothes and unattended physical problems are indications of:
- a. Emotional abuse
 - b. Sexual abuse
 - c. Physical abuse
 - d. Neglect
42. Health professional, educators and other professionals working with children have the responsibility to report and intervene cases of child abuse. Primary prevention is:
- a. Outpatient services
 - b. Day care facilities
 - c. Health teaching for high risk groups
 - d. Inpatient unit

Mr. Alcantara, a 42-year-old married man was brought to the ER after a mauling incident. He was intoxicated, shouting wildly, and threatening everyone he sees.

43. Alcohol is classified as a/an:
- a. CNS depressant
 - b. CNS stimulant
 - c. opiate
 - d. hallucinogen
44. Which of the following health problems is commonly associated with prolonged use of alcohol?
- a. Pneumonia
 - b. Thyroidism
 - c. Cirrhosis of the liver
 - d. Diabetes Mellitus
45. DISULFIRAM (antabuse) therapy is to be continued at home. The nurse should warn Mr. Alcantara to avoid:
- a. Sedatives
 - b. Cough medicine
 - c. Antibiotics
 - d. Analgesics
46. The nurse knows that disulfiram is contraindicated for a patient with:
- a. Renal disorder
 - b. Hypothyroidism
 - c. Gastric ulcer
 - d. Diabetes Mellitus

Claire, a 60-year-old widow is admitted for insomnia, nervousness, and lack of appetite. She is restless and often has to be prodded to respond to the nurses during the interview. Tearfully, she tells the admitting nurse that she became sickly ever since her only son moved to the States with his family.

47. Taking into consideration Claire's response to her problem, the nurse accurately identifies her level of anxiety as:
- a. Moderate
 - b. Severe
 - c. Panic
 - d. Mild
48. The nurse initiates the nurse-client relationship with Claire. Which of the following is the least appropriate topic during the orientation phase:
- a. Objectives of the NPI
 - b. Client's perception of the reason for her hospitalization
 - c. Exploration of the client's inadequate coping mechanism
 - d. Establishment of a regular schedule for interaction
49. The nurse utilizes the behavior theory of anxiety as a framework of care for Claire. This means that she views the client's anxiety as:
- a. Associated to anxiety experienced in early childhood
 - b. Due to abnormal physiologic processes
 - c. The result of unresolved conflicts in the past
 - d. Learned responses as a result of experience
50. Halfway during a psychotherapeutic session, Claire diverts the topic when her son is mentioned. True to the objective of the session, the nurse best help Claire identify her feelings by saying:
- a. "Are you tired? We can stop the session if you want"
 - b. "I noticed that you've changed our topic. Would you like to talk about it?"
 - c. "I noticed that you've changed the topic. Are you uncomfortable talking about your son?"
 - d. "What made you change the topic?"
51. In interacting with Claire, you should consider her psychosocial problems as typical of which stage of personality development?

- a. Intimacy vs isolation
- b. Group identity vs alienation
- c. Generativity vs stagnation
- d. Ego integrity vs despair

Kris, 35 years old, was admitted to the hospital with periodic episodes of manic behavior alternating with depression. Diagnosis: Bipolar disorder

52. The nurse identifies the psychoanalytic theorist's view of manic reactions as:

- a. A reaction formation to feelings and depression
- b. A reaction to loss of control over one's environment
- c. A result of genetic transmission
- d. A result of negative perception of the self and the world

53. Which of the following statements is true of manic reaction? It is

- a. An expression of destructive impulses
- b. A means of coping with frustration
- c. A means of ignoring reality
- d. An attempt toward off feeling of underlying depression

54. A nurse's primary consideration in the planning care for Kris should be:

- a. Providing adequate nutrition
- b. Providing activities using fine music groups
- c. Monitoring intake and output
- d. Preventing exhaustion and cardiac arrest

55. To de-escalate Kris' hyperactive behavior, the nurse should:

- a. Encourage client to join in large group activities
- b. Restrain the client
- c. Remove client from active environmental stimuli
- d. Allow client to participate in competitive games

56. Nursing care plan for a hyperactive patient like Kris should give priority to:

- a. Discourage him from manipulating the staff
- b. Prevent him from assaulting other patients
- c. Protect him from suicidal attempts
- d. Provide adequate food and fluid intake

57. The most appropriate staff attitude when dealing with Kris is:

- a. Consistency
- b. Kindness
- c. Acceptance
- d. Watchfulness

58. To provide Kris' basic needs, the nurse assumes the surrogate mother role, which is exemplified by:

- a. Administering medication as ordered
- b. Bathing, dressing, feeding Kris
- c. Taking vital signs
- d. Supervising ward games and activities

59. A priority nursing diagnosis would be:

- a. Ineffective individual coping
- b. Altered family process
- c. Potential for violence, self-directed
- d. Sensory-perceptual disturbance

60. Initially, one of the following activities would be appropriate for Edu

- a. Playing basketball
 - b. Playing chess
 - c. gardening
 - d. writing
61. The current trend in Psychiatric nursing care includes:
- a. Use of psychoanalysis
 - b. Delineation of roles and functions
 - c. Non-professional for counseling task
 - d. Working in community for social change
62. The treatment of choice for psychoneurosis is:
- a. Hypnosis
 - b. ECT
 - c. psychotherapy
 - d. chemotherapy
63. In dealing with a suspicious patient, the nurse would:
- a. Reason with him
 - b. Point out his false beliefs
 - c. Banter with him
 - d. Listen calmly without trying to enforce his false ideas
64. High caloric diet is indicated for:
- a. Depressed patients
 - b. Neurotic patients
 - c. manic patients
 - d. psychotic patients
65. Your patient asked, "Am I crazy?" Your best response is:
- a. "Yes, you are."
 - b. "What do you think?"
 - c. "Crazy?"
 - d. "You seem normal."

There are two ways in which man copes with stress: task – oriented reaction and ego – oriented reaction.

66. An employee following an embarrassing experience provoked by his boss has the impulse to strike him. He suddenly develops numbness of the right hand.
- a. Conversion
 - b. Rationalization
 - c. Reflection
 - d. Introjection
67. A shy young man takes a public speaking course, which emphasizes making friends and influencing people. He is attempting to cover up his shape by becoming proficient in speaking to a group.
- a. Dissociation
 - b. Identification
 - c. Sublimation
 - d. Compensation
68. A defense mechanism that involves escaping reality, wish fulfillment, and partial gratification impulses common among children is:
- a. Dissociation
 - b. Conversion
 - c. Denial
 - d. Fantasy
69. A three year old boy who has been feeding himself and drinking water from a glass insists on his mother feeding him from a bottle after the birth of a newborn baby in the family
- a. Symbolization
 - b. Reaction formation
 - c. Regression
 - d. Conversion
70. A politician who is immoral himself keeps accusing a rival politician of graft and corruption. This is:
- a. Repression
 - b. Sublimation
 - c. Projection
 - d. Rationalization
71. Linda almost failed in the written test. She complains to her friend that the teacher did not discuss some questions in the classroom. She is using the defense mechanism of:

- a. Denial
- b. Rationalization
- c. Projection
- d. Displacement

72. The following are anti-parkinson agents:

- a. Cogentin, Artane, Parlodel, Akineton, Benadryl, Larodopa, Eldepryl, Symmetrel
- b. Stelazine, Serentil, Thorazine, Trilafon, Clozaril, Mellaril, Haldol, Prolixin
- c. Asendin, Nopramin, Tofranil, Sinequan, Anafranil, Aventyl, Vivactil, Elavil, Prozac, Paxil, Zoloft
- d. Alcohol, Barbiturates, Opiates, Inhalants, Narcotis, Marijuana, Morphine

73. The following are anti-depressants:

- a. Cogentin, Artane, Parlodel, Akineton, Benadryl, Larodopa, Eldepryl, Symmetrel
- b. Stelazine, Serentil, Thorazine, Trilafon, Clozaril, Mellaril, Haldol, Prolixin
- c. Asendin, Nopramin, Tofranil, Sinequan, Anafranil, Aventyl, Vivactil, Elavil, Prozac, Paxil, Zoloft
- d. Alcohol, Barbiturates, Opiates, Inhalants, Narcotis, Marijuana, Morphine

74. The following are anti-psychotic agents:

- a. Cogentin, Artane, Parlodel, Akineton, Benadryl, Larodopa, Eldepryl, Symmetrel
- b. Stelazine, Serentil, Thorazine, Trilafon, Clozaril, Mellaril, Haldol, Prolixin
- c. Asendin, Nopramin, Tofranil, Sinequan, Anafranil, Aventyl, Vivactil, Elavil, Prozac, Paxil, Zoloft
- d. Alcohol, Barbiturates, Opiates, Inhalants, Narcotis, Marijuana, Morphine

75. The following substances are considered “uppers” (triggers of sympathetic response), except:

- a. Cocaine
- b. Hallucinogen
- c. Amphetamine
- d. Opiates

76. The following substances are considered “downers”, except:

- a. Alcohol
- b. Barbiturates
- c. Inhalants
- d. Lithium Carbonate

77. The following are monoamine oxidase inhibitors:

- a. Marplan, Nardil, Parnate
- b. Valium, Librium, Ativan, Serax, Tranxene, Miltown, Equanil, Vistaril, Atarax, Inderal, Bupar
- c. Cogentin, Artane, Parlodel, Akineton, Benadryl, Larodopa, Eldepryl, Symmetrel
- d. Stelazine, Serentil, Thorazine, Trilafon, Clozaril, Mellaril, Haldol, Prolixin

78. The following are anti-anxiety agents:

- a. Marplan, Nardil, Parnate
- b. Valium, Librium, Ativan, Serax, Tranxene, Miltown, Equanil, Vistaril, Atarax, Inderal, Bupar
- c. Cogentin, Artane, Parlodel, Akineton, Benadryl, Larodopa, Eldepryl, Symmetrel
- d. Stelazine, Serentil, Thorazine, Trilafon, Clozaril, Mellaril, Haldol, Prolixin

79. The following are extrapyramidal side effects, except:

- a. Akathisia
- b. Akinesia

- c. Dystonia
 - d. Epilepsy
80. Tyramine rich foods are avoided when your are taking what therapeutic agents:
- a. Marplan, Nardil, Parnate
 - b. Valium, Librium, Ativan, Serax, Tranxene, Miltown, Equanil, Vistaril, Atarax, Inderal, Bupar
 - c. Cogentin, Artane, Parlodel, Akineton, Benadryl, Larodopa, Eldepryl, Symmetrel
 - d. Stelazine, Serentil, Thorazine, Trilafon, Clozaril, Mellaril, Haldol, Prolixin
81. Your answer in #80 is classified as:
- a. Anti-depressants
 - b. Monoamine Oxidase Inhibitors
 - c. Anti-anxiety agents
 - d. Anti-psychotic agents
82. Lithium Carbonate is the drug of choice for manic patients. It's normal therapeutic value range from:
- a. 0.5 – 1.5 meq/L
 - b. 2-3 meq/L
 - c. 0.2-0.7 meq/L
 - d. 1-2 meq/L
83. Prior to lithium intake, baseline laboratory tests are requested. These includes:
- a. BUN
 - b. Creatinine
 - c. Serum electrolytes
 - d. All of these

Pablito, aged 6 was diagnosed as having attention deficit hyperactivity disorder

84. In the nursing care plan for Pablito, the nurse identified this nursing diagnosis of ineffective individual coping based on one of the following behaviors:
- a. Easily distracted by extraneous stimuli
 - b. Inability to verbalize his feelings
 - c. Initiates fights with his classmates
 - d. Constantly tells lies
85. After initial assessment, the nurse asks Pablito's parents. "Before bringing him for evaluation, what have you done?" This question is:
- a. Therapeutic, because it provides more information on the history of the child
 - b. Not therapeutic, because ti looks into the personal capability of the parents
 - c. Therapeutic, because it reduces the anxiety of the parents
 - d. Not therapeutic, because it might be misinterpreted by the parents
86. Pablito is most likely to exhibit which of the following symptoms:
- a. Destructive, somatic complaints, physical aggressiveness
 - b. Poor concentration, decreased attention span and impulsiveness
 - c. Distractibility, assertiveness, somatic complaints
 - d. Distractibility, restlessness, decreased attention span
87. Which of the following drugs is usually ordered for a child with this disorder?
- a. Methylphenidate (Ritalin)
 - b. Chlorpromazine (Thorazine)
 - c. Diazepam (Valium)
 - d. Imipramine (Tofranil)
88. Pablito's parents express apprehension on the ability to care for him,. The nurse identifies this appropriate diagnosis as:

- a. Hopelessness
- b. Altered parenting role
- c. self-esteem disturbance
- d. impaired judgment

A 50-year-old lawyer, Gerard, was admitted with the chief complaint of headache, dizziness, and cold, clammy perspiration a few hours prior to admission. His BP is 180/100. Upon admission, he says: "there is really nothing wrong with me, I'm alright".

89. Based on the initial data, the nurse was able to identify the patient's problem
- a. Moderate to severe anxiety
 - b. Ineffective individual coping
 - c. impaired social interactions
 - d. knowledge deficit related to illness
90. Sullivan postulate that anxiety:
- a. Usually leads to an ineffective relationship
 - b. Is simultaneously an adaptation and a stressor
 - c. Always perceived as a negative feeling
 - d. Is interpersonal in origin
91. A characteristic feature of a psychophysiologic disorder is that there is:
- a. Anxiety which is transformed into physical symptoms
 - b. Specific physical condition related to specific stimuli psychologically meaningful to the patient
 - c. No organic pathology
 - d. Unrealistic interpretation of physical symptoms as abnormal and persistently seeks medical care
92. A commonly used defense mechanism by a patient with essential hypertension is:
- a. Rationalization
 - b. Displacement
 - c. Suppression
 - d. Denial
93. The nurse can help Gerard identify the source of stress in his life by asking one of the following questions:
- a. "How do you feel about your hospitalization?"
 - b. "How many close friends do you have?"
 - c. "How would you describe your relationship with your peers?"
 - d. "What kind of situation upsets you most?"
94. Gerard is being prepared for discharge and treatment has to be continued after discharge. The nurse should give priority to which of the following nursing interventions?
- a. Allowing him to express his concerns about the treatment
 - b. Involving the family in the health teachings program
 - c. Explaining the medical regimen clearly
 - d. Evaluating his readiness for health teaching

Linda, a 40 year old engineer and legally separated from her husband for one year, was brought to the ER after taking an overdose of Valium. This is the second suicidal attempt.

95. In her initial assessment, the nurse should include one of the following questions?
- a. "Are you anxious about the family's reactions to your suicide attempt?"
 - b. "When did you first think of hurting yourself?"
 - c. "Do you still feel like hurting yourself?"
 - d. "Is there a history of suicide in your family?"
96. During her first days of confinement, one of the following should be included in her plan of care:
- a. Restriction to her room

- b. Exploring her fears and anxieties
 - c. Providing an environment free of environmental stimuli
 - d. Keeping her under constant observation
97. Which of the following is a relevant nursing diagnosis?
- a. Ineffective individual coping
 - b. Potential for violence, self-directed
 - c. Moderate anxiety
 - d. Impaired social interaction
98. This drug will most probably be ordered for Linda
- a. Thiotexene (Navane)
 - b. Imipramine (Tofranil)
 - c. Biperiden (Akineton)
 - d. Triethylphenidyl (Artane)
99. While Linda is taking antidepressant medication, and depression has lessened, the nurse should prioritize this intervention:
- a. Encouraging Linda to express her feelings about her loss
 - b. Avoiding discussions about her suicide attempt
 - c. Assisting her in identifying the significant other in her life
 - d. Maintain suicide precaution
100. Linda is being prepared for discharge. She will continue taking antidepressant medication for a month. It is most important that the nurse includes the nursing intervention in her discharge plan.
- a. Ask the physician about the take home meds
 - b. Explain the importance of monitoring her food intake
 - c. Instruct her to return after one week for follow-up
 - d. Ask Linda about her plans after discharge from the hospital