Chapter 01 Pre Test

Smith,Crystal

Submitted: 1/27/2011 4:02:10 PM **Grade:** 6.7% **Attempt Number:** 1/3 **Questions Attempted:** 15/15

1. **The client expresses guilt related to having a mental illness and describes the family's view of mental illness as grounded in ancient history, primitive and preliterate. Given the nurse's knowledge of historical beliefs regarding mental illness, the nurse can expect having to address the family's belief that the client has:**
   a. Received divine inspiration and is to be revered.
   b. Violated certain taboos and is being punished.
   c. Acquired symptoms that arise only in client's mind.
   d. Acquired an illness that cannot be cured.

   Grade: 0
   User Responses: c.Acquired symptoms that arise only in client's mind.
   Feedback: a.Rationale: The belief that "mental illness" was punishment for violating taboos or neglecting ritual obligations was consistent with the beliefs of primitive and preliterate societies. The belief that illness was incurable was not consistent with preliterate beliefs. Various cures were attempted through appeal, prayer, confession, punishment, and other measures directed to the superhuman forces that had inflicted the suffering. Later Arab beliefs would be consistent with divine inspiration and reverence. Preliterate, primitive beliefs would accept that the symptoms were real and not only in the mind of the client.
   Cognitive Level: Application
   Nursing Process: Assessment
   Client Need: Psychosocial Integrity

2. **The psychiatric nurse is asked the origin of the term *bedlam*. The nurse's correct response is that this term was used to refer to:**
   a. St. Mary of Bethlehem hospital in London, where the mentally ill were beaten and tortured for the entertainment of others.
   b. The belief that mental disorders were incurable and mentally ill persons were dangerous.
   c. The general state of treatment of the mentally ill after the fall of the Roman Empire.
   d. Hôpital Général in Paris, where stakes, irons, and dungeons were used to confine the mentally ill.

   Grade: 0
   User Responses: c.The general state of treatment of the mentally ill after the fall of the Roman Empire.
   Feedback: a.Rationale: The term *bedlam* referred to St. Mary of Bethlehem hospital and continues to be used to describe any place or condition of noise and confusion. While the care of the mentally ill after the fall of the Roman Empire and in the Hôp ital Général might be consistent with the general definition of bedlam, the term did not originate in these places. The belief that mental disorders were incurable and mentally ill persons were dangerous is not considered specific with the term *bedlam*.
   Cognitive Level: Application
   Nursing Process: Implementation
   Client Need: Psychosocial Integrity

Smith,Crystal

Submitted: 1/27/2011 4:02:10 PM **Grade:** 6.7% **Attempt Number:** 1/3 **Questions Attempted:** 15/15

3. **During an exam, the nursing student is asked to identify the "father of American psychiatry." Which of the following is the correct choice?**
   a. Benjamin Rush
   b. Benjamin Franklin
   c. Sigmund Freud
   d. William Cullen

   Grade: 0
   User Responses: c.Sigmund Freud
   Feedback: a.Rationale: Benjamin Rush is called the "father of American psychiatry." Benjamin Franklin was another leader within the reform and humanitarian movement. William Cullen believed that mental disorder was a matter of disordered physiology. Sigmund Freud's major contribution was explaining human behavior in psychologic terms.
   Cognitive Level: Knowledge
   Nursing Process: Evaluation
   Client Need: Psychosocial Integrity

4. **The newly admitted client is tearful and verbalizing fear and anxiety because the family is not being allowed to stay with the client during the hospitalization. Which would be the nurse's best course of action?**
   a. Reassure the client of his/her personal safety and the quality of care.
   b. Ignore the client's behavior to avoid reinforcing the client's fear and anxiety.
   c. Encourage the client to participate in groups and activities.
   d. Assess the usual practices and customs of the client's family.

   Grade: 0
   User Responses: b.Ignore the client's behavior to avoid reinforcing the client's fear and anxiety.
   Feedback: a.Rationale: An assessment of the practices and customs of the client's family is the priority. Behavior that is considered deviant in one cultural context may be considered desirable and normal in another. Ignoring the behavior is not caring or appropriate. Reassuring the client concerning his/her personal safety and encouraging participation in groups and activities are appropriate, but only after the first step of the nursing process, which is a thorough assessment.
   Cognitive Level: Application
   Nursing Process: Assessment
   Client Need: Psychosocial Integrity

5. **A person expresses concern about the mental health of a close family member who is having his body covered with more and more tattoos. The nurse should first respond:**
   a. "How does this behavior make you feel?"
   b. "What have you done about this situation so far?"
   c. "That sounds pretty bizarre and deviant to me."
   d. "Tell me about your family member's social and peer groups."

Grade: 0
User Responses: a.“How does this behavior make you feel?”
Feedback: a.Rationale: Asking for more information about social and peer groups would be part of an appropriate assessment, which is the first step of the nursing process. Behavior that is considered deviant in one cultural context may be considered appropriate and desirable in another. Making a judgment of bizarre and deviant behavior without further data is inappropriate. Asking about the other’s feelings and earlier interventions does not address the specific concern, does not elicit additional data regarding the cultural context, and does not lead to an accurate understanding of the behavior.
Cognitive Level: Application
Nursing Process: Assessment
Client Need: Psychosocial Integrity

6. **The nurse observes the client on the inpatient psychiatric unit softly chanting five prayers before each meal. Which of these nursing actions should be included in the plan of care?**
   a. Inquire as to the client’s religious and cultural needs.
   b. Ignore the behavior so as to not reinforce it.
   c. Restrict the client to one prayer before each meal.
   d. Teach the client to substitute progressive relaxation for the extra prayers.

Grade: 0
User Responses: d.Teach the client to substitute progressive relaxation for the extra prayers.
Feedback: a.Rationale: The nurse should inquire as to the client’s religious and cultural needs (further assessment) before planning care. Behavior that is considered odd in one cultural context may be considered appropriate and desirable in another. Choosing to ignore the behavior does not advance the nurse’s ability to plan culturally sensitive care. Restricting the number of prayers and trying to substitute relaxation for prayer may be inappropriate interventions if the behavior is consistent with cultural and religious beliefs and is not causing any problems. Even if the behavior is not part of any religious or cultural beliefs, initially restricting it may exacerbate the client’s anxiety.
Cognitive Level: Application
Nursing Process: Planning
Client Need: Psychosocial Integrity

Smith,Crystal

Submitted: 1/27/2011 4:02:10 PM **Grade:** 6.7% **Attempt Number:** 1/3 **Questions Attempted:** 15/15

7. **The nurse is screening clients during a mental health fair at a local community center. Given the nurse's knowledge of the top 10 causes of mental disability, the nurse should screen in which of the following areas?**
Select all correct answers.
a. Mood
b. Anxiety level
c. Thought processes
d. Previous life experiences
e. Alcohol use

Grade: 0
User Responses: a.Mood,b.Anxiety level,e.Alcohol use
Feedback: a.Rationale:
Mood. Depression (1st) and bipolar disorder (6th) are among the 10 leading causes of mental disability in the world.

Alcohol use. Alcohol use is the 4th leading cause of mental disability in the world.

Thought processes. Schizophrenia, characterized by altered thought processes, is the 9th leading cause of mental disability in the world.

Anxiety level. Obsessive-compulsive disorder is the 10th leading cause of mental disability in the world.

Previous life experiences. While previous life experiences can give insight into mental health, it would not be an area relevant to screening and is not one of the 10 leading causes of mental disability.
Cognitive Level: Application
Nursing Process: Assessment
Client Need: Psychosocial Integrity

8. **The nurse is evaluating staff knowledge of the top 10 leading causes of mental disability in the world. Which choices would demonstrate staff knowledge?**
Select all correct answers.
a. Illicit drug use
b. Phobic disorder
c. Major depression
d. Eating disorders
e. Alcohol use

Grade: 0
User Responses: a.Illicit drug use,b.Phobic disorder,d.Eating disorders
Feedback:
a.Rationale:
Major depression. Major unipolar depression is the leading cause of mental disability worldwide.

Alcohol use. Alcohol use is the 4th leading cause of mental disability worldwide.

Eating disorders. Eating disorders are not among the top 10 leading causes of mental disability worldwide.

Illicit drug use. While a major problem, illicit drug use is not among the top 10 leading causes of mental disability worldwide.

Phobic disorder. Phobic disorder is not among the top 10 leading causes of mental disability worldwide.
Cognitive Level: Application
Nursing Process: Evaluation
Client Need: Psychosocial Integrity

9. **The nurse is planning strategies to prevent mental disability among older adults in the community. Given the top 10 leading causes of mental disability worldwide, the nurse should give priority to which of the following areas for intervention?**
   a. Drug and alcohol education
   b. Strategies to elevate mood
   c. Interventions for reality orientation
   d. Stress management

Grade: 0
User Responses: c.Interventions for reality orientation
Feedback:
a.Rationale: Strategies to elevate mood would be the priority because major depression is the primary cause of mental disability worldwide. Reality orientation, drug and alcohol education, and stress management are important strategies for this population, their associated disorders fall lower on the list of leading causes of mental disability.
Cognitive Level: Application
Nursing Process: Planning
Client Need: Psychosocial Integrity

10. **The health care team is gathering data in order to determine if the client is experiencing a mental disorder. To help establish a diagnosis, a priority question for the nurse to ask would be:**
    a. “Are you experiencing some degree of personal distress?”
    b. “Are you having thoughts of death?”
    c. “Are you having difficulty working and playing productively?”
    d. “Are you having difficulty with interpersonal relationships?”

Grade: 1
User Responses: b.“Are you having thoughts of death?”
Feedback: a.Rationale: Although an inability to work and play productively, impaired interpersonal relationships, and personal distress characterize mental disorder, thoughts of death also characterize mental disorder and are the priority due to safety issues for the client.
Cognitive Level: Application
Nursing Process: Assessment
Client Need: Psychosocial Integrity

11. **The nurse is reflecting on recent interactions with several people. Which observation indicates to the nurse that a person is exhibiting signs of a mental disorder?**
    a. Dressing like a famous television and movie personality
    b. Maintaining a highly structured, ritualistic way of accomplishing tasks
    c. Reporting an inability to work because of a low mood
    d. Reporting having no stress and no problems

Grade: 0
User Responses: d.Reporting having no stress and no problems
Feedback: a.Rationale: An inability to work due to a low mood is consistent with the psychological group of symptoms that characterize mental disorder. Dressing like a famous personality, reporting no stress or problems, and maintaining highly structured routines may seem odd or lead the nurse to do further assessment, but they do not meet the generally accepted definition of a mental disorder.
Cognitive Level: Analysis
Nursing Process: Assessment
Client Need: Psychosocial Integrity

12. **The nurse is analyzing assessment data in preparation for a mental health care team meeting to decide on the client's mental health diagnosis. Which reference would be most appropriate for the nurse to take to the meeting?**
    a. *Diagnostic and Statistical Manual of Mental Disorders IV-TR*
    b. The client's medical record from a previous admission
    c. The psychiatrist's progress notes
    d. Psychiatric nursing care plan manual, most recent edition

Grade: 0
User Responses: c.The psychiatrist's progress notes
Feedback: a.Rationale: The *Diagnostic and Statistical Manual of Mental Disorders IV-TR* identifies, standardizes, and categorizes mental disorders and is the standard resource for mental health care teams. A psychiatric nursing care plan outlines the nursing process in the care of the client and would not be specific to other disciplines on the team. Although the previous medical record may be accessed at some point, data from each admission should be examined in relation to the *DSM*. Data from all mental health team members, not just the psychiatrist's progress notes, should be considered in the determination of the diagnosis.
Cognitive Level: Application
Nursing Process: Diagnosis
Client Need: Psychosocial Integrity

13. **The nurse is conducting a community assessment to identify mental health needs in relation to *Healthy People 2010*. To accomplish this task, the nurse should plan data collection in which of the following areas? Select all correct answers.**
    a. Adequacy of adolescent suicide prevention programs
    b. Adequacy of mental health screening in juvenile justice facilities
    c. Referral statistics for persons seen in primary health care who do not receive mental health screening
    d. Number of services for homeless adults with serious mental illness
    e. Number of jail diversion programs for adults with serious mental illness

Grade: 0
User Responses: a.Adequacy of adolescent suicide prevention programs,b.Adequacy of mental health screening in juvenile justice facilities,d.Number of servicesfor homeless adults with serious mental illness

Feedback:

a.Rationale:
Adequacy of adolescent suicide prevention programs addresses the problem of high suicide rates among adolescents.

Number of jail diversion programs for adults with serious mental illness addresses the inadequacy of community-based jail diversion programs for adults with serious mental illness.

Adequacy of mental health screening in juvenile justice facilities addresses the current lack of screening.

Number of services for homeless adults with serious mental illness addresses the number of homeless adults with serious mental illness.

Referral statistics for persons seen in primary health care who do not receive mental health screening is specific to this *Healthy People 2010* problem.
Cognitive Level: Application
Nursing Process: Assessment
Client Need: Psychosocial Integrity

14. **The industrial nurse is using the *Healthy People 2010* report to plan nursing care to address the mental health of employees. Given your knowledge of the mental health problems identified in this report, choose the nursing diagnosis that is most consistent with the identified problem specific to worksites in the U.S.**
    a. Altered Family Processes
    b. Fear
    c. Powerlessness
    d. Stress Overload

Grade: 0
User Responses: b.Fear
Feedback: a.Rationale: *Healthy People 2010* specifically identifies as a problem in worksites a failure to provide programs to prevent or reduce employee stress. Powerlessness, fear, and altered family processes may be correlated with various mental health problems, but are not specifically related to the workplace in *Healthy People 2010.*
Cognitive Level: Application
Nursing Process: Assessment
Client Need: Psychosocial Integrity

15. **The nurse is asking a nurse colleague questions about the *Healthy People 2010* report. Where should the colleague refer the nurse for more information?**
    a. U.S. Department of Health and Human Services
    b. World Health Organization
    c. American Nurses Association
    d. U.S. Surgeon General's Office

Chapter 01 Pre Test

Smith,Crystal

Submitted: 1/27/2011 4:02:10 PM Grade: 6.7% Attempt Number: 1/3 **Questions Attempted:** 15/15

Grade: 0
User Responses: d.U.S. Surgeon General's Office
Feedback: a.Rationale: *Healthy People 2010* is a report released by the U.S. Department of Health and Human Services that identifies major public health/mental health problems in the U.S. and determines specific objectives to be achieved by the end of the decade. The American Nurses Association, the Surgeon General's Office, and the World Health Organization are all valuable resources but are not the leading sources of information on *Healthy People 2010.*
Cognitive Level: Application
Nursing Process: Implementation
Client Need: Psychosocial Integrity

Chapter 01 Pre Test

Smith,Crystal

Submitted: 1/27/2011 4:02:10 PM **Grade:** 6.7% **Attempt Number:** 1/3 **Questions Attempted:** 15/15

Activity Name: Chapter 01 Pre Test

1. b. Violated certain taboos and is being punished.
2. a. St. Mary of Bethlehem hospital in London, where the mentally ill were beaten and tortured for the entertainment of others.
3. a. Benjamin Rush
4. d. Assess the usual practices and customs of the client's family.
5. d. "Tell me about your family member's social and peer groups."
6. a. Inquire as to the client's religious and cultural needs.
7. a. Mood and e.Alcohol use and c.Thought processes and b.Anxiety level
8. c. Major depression and e.Alcohol use
9. b. Strategies to elevate mood
10. b. "Are you having thoughts of death?"
11. c. Reporting an inability to work because of a low mood
12. a. *Diagnostic and Statistical Manual of Mental Disorders IV-TR*
13. a. Adequacy of adolescent suicide prevention programs and e.Number of jail diversion programs for adults with serious mental illness and b.Adequacy of mental health screening in juvenile justice facilities and d.Number of services for homeless adults with serious mental illness and c.Referral statistics for persons seen in primary health care who do not receive mental health screening
14. d. Stress Overload
15. a. U.S. Department of Health and Human Services