

Submitted: 2/8/2011 12:03:4
3 AM Grade: 37.5%



Attempt Number: 1/3

Questions Attempted: 24/24

1. **The client with a bipolar disorder says to the nurse, "I do not know why I should take a medication when mental illnesses are caused by how people were raised. How will a medication fix my childhood?" Which of the following nursing responses is correct?**
- a. Medications stimulate clients so that they can talk about their past.
 - b. Often treatment with medications helps clients to forget about their troubled pasts.
 - c. Clients should take the medications prescribed for them since the health care team knows what is best.
 - d. The symptoms of serious mental illness are due to physiological changes in the brain.

Grade: 1

User Responses: d.The symptoms of serious mental illness are due to physiological changes in the brain.

Feedback: a.Rationale: Studies of the impact of psychopharmacology on the functioning of the brain demonstrate that the symptoms of serious mental illness are due to impairments in the brain physiology. Medications do not stimulate clients to talk although they may improve brain functioning so that clients can think and talk about their lives in a more organized way. Clients are usually helped to cope and learn from their past, not to forget it.

Cognitive Level: Analysis

Nursing Process: Implementation

Client Need: Physiological Integrity

2. **The nurse tells her supervisor that she does not need to go to the educational offering on psychopharmacology because she had a solid foundation in nursing school four years ago. Which of the following is a correct response that should be given to the nurse?**
- a. Psychopharmacology knowledge continually grows due to new research and clinical practice.
 - b. The best approach is to update psychopharmacology every eight to ten years.
 - c. Even though the medications and their side effects have not changed, there might be some new methods of educating patients.
 - d. Since nursing school four years ago is so recent, there would be few new developments.

Grade: 0

User Responses: d.Since nursing school four years ago is so recent, there would be few new developments.

Feedback: a.Rationale: New knowledge about psychopharmacology, including medications, their side effect profiles, and adherence is learned continually from research and practice. Much new information has accumulated in the past four years, including how medications are used and tolerated by clients.

Cognitive Level: Application

Nursing Process: Evaluation

Client Need: Safe, Effective Care Environment

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3. In completing the admission assessment for a client with major depressive disorder, the nurse should include which of the following questions to complete the item related to the client's current medications?
- a. What medications do you buy without a prescription, such as aspirin, laxatives, antacids, and the like?
 - b. What kind of insurance do you have?
 - c. What medications do you take for your mental illness?
 - d. What medications do you take that are prescribed by any of your health care providers?
 - e. What herbals and nutritional supplements do you take?

Grade: 0

User Responses: c.What medications do you take for your mental illness?,d.What medications do you take that are prescribed by any of your health care providers?

Feedback: a.Rationale:
What medications do you take that are prescribed by any of your health care providers? It is important to know what medications the client is taking for any condition due to their potential to impact behavior or to interact with psychiatric medications.

What medications do you buy without a prescription, such as aspirin, laxatives, antacids, and the like? OTCs can also interact with many psychiatric medications.

What herbals and nutritional supplements do you take? Herbals and supplements can impact behavior and interact with prescribed medications.

What medications do you take for your mental illness? Asking specifically about medications for the mental illness may help focus the patient.

What kind of insurance do you have? Insurance does not provide information about what medications the client is taking.

Cognitive Level: Application

Nursing Process: Assessment

Client Need: Psychosocial Integrity

4. A client who has not responded to citalopram (Celexa) is being switched to venlafaxine (Effexor) and states, "There's really no reason for it to work any better than Celexa, is there?" What is the correct nursing response?
- a. "Although their actions are the same, people often respond differently to similar medications."
 - b. "Whereas Celexa increases one chemical related to depression, Effexor increases two."
 - c. "How the medications work is not important; you should just take what is ordered."
 - d. "You should talk more about your hopelessness to your therapist."

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User Responses: d. "You should talk more about your hopelessness to your therapist."

Feedback: a. Rationale: Citalopram (Celexa) is an SSRI and increases serotonin in the neural synapses. Venlafaxine (Effexor) is a SNRI and increases both serotonin and norepinephrine in the neural synapses. Their actions are therefore different. Even though the patient's comment does lack some hope, the nurse can intervene by providing education. It is important for clients to be participants in their care and not just recipients of care.
Cognitive Level: Analysis
Nursing Process: Implementation
Client Need: Physiological Integrity

5. **During an educational session, a staff member asks the nurse how antipsychotic medications in general work to help stop auditory hallucinations in clients with schizophrenia. Which nursing response is correct?**
- a. The antipsychotic medications make more acetylcholine available at the neural synapses.
 - b. The antipsychotic medications stimulate areas of the brain responsible for attention and concentration.
 - c. The antipsychotic medications regulate and generally decrease the amount of dopamine that binds to receptor sites.
 - d. The antipsychotic medications increase the amount of serotonin and norepinephrine available at the neural synapses.

Grade: 0

User Responses: d. The antipsychotic medications increase the amount of serotonin and norepinephrine available at the neural synapses.

Feedback: a. Rationale: The conventional antipsychotic medications bind to dopamine receptors and thus decrease their actions. The newer antipsychotic medications still interact with the dopamine system, but they bind less potently to the receptor site. Although the newer antipsychotic medications interact with other neurotransmitters, the impact on hallucinations is related to dopamine. The other neurotransmitter interactions alter negative symptoms. Increasing serotonin and norepinephrine is the action of some antidepressants. Increasing acetylcholine is the action of acetylcholinesterase inhibitors. CNS stimulants stimulate the areas in the brain.
Cognitive Level: Application
Nursing Process: Implementation
Client Need: Safe, Effective Care Environment

6. **A staff member asks the nurse why bupropion (Wellbutrin) was added to a depressed client who is already on citalopram (Celexa) and the citalopram was not discontinued. What nursing response is correct?**
- a. Both medications have the same mechanism of action, and the citalopram should be discontinued.
 - b. The bupropion was added to treat the client's insomnia.
 - c. The bupropion was added to decrease the risk of the client's developing manic symptoms.
 - d. Since bupropion has a different mechanism of action, it can be added to an SSRI.

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User Responses: d. Since bupropion has a different mechanism of action, it can be added to an SSRI.

Feedback: a. Rationale: Citalopram (Celexa) is a selective serotonin reuptake inhibitor and increases the amount of serotonin available in the neural synapses. The mechanism of action of bupropion is different and thus it can be given concomitantly with SSRIs. Bupropion does not decrease the risk of mania when added to an SSRI and is not useful in inducing sleep.

Cognitive Level: Analysis

Nursing Process: Implementation

Client Need: Safe, Effective Care Environment

7. **The nurse would expect which of the following medication responses in a client with a high metabolic rate due to ethnicity?**

- a. Increased allergic and systemic reactions
- b. Increased side effects and adverse reactions at lower starting doses
- c. Reduced adherence to the medication due to GI disturbances
- d. Reduced effectiveness of the medication at the usual starting dose

Grade: 1

User Responses: d. Reduced effectiveness of the medication at the usual starting dose

Feedback: a. Rationale: Clients with high metabolic rates eliminate the medication from the body more quickly, producing effects below the optimal level. Increased side effects occur in clients with low metabolic rates. Allergic reactions are not related to metabolic rate. Reduced adherence often occurs in people with more side effects, which is not typical of clients with high metabolic rates. They could perhaps have reduced adherence due to lack of efficacy of the medication.

Cognitive Level: Analysis

Nursing Process: Evaluation

Client Need: Physiological Integrity

8. **What information would be correct for the nurse to teach families of clients with mental illness concerning expressed emotionality?**

- a. High expressed emotionality with criticism leads to better communication.
- b. Low expressed emotionality is related to increased hospital stays.
- c. Low expressed emotionality leads to more relapse and symptomatic episodes.
- d. High expressed emotionality is related to poorer prognosis.

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User Responses: d.High expressed emotionality is related to poorer prognosis.

Feedback: a.Rationale: More than 40 years of research on high expressed emotionality shows a poorer prognosis with more relapses. In some ethnic groups, high expressed emotionality with criticism is perceived as critical by the client. Low expressed emotionality is not related to increased hospital stays. High expressed emotionality leads to more relapse and symptomatic episodes.

Cognitive Level: Application

Nursing Process: Implementation

Client Need: Physiological Integrity

9. **When Asian-American clients are begun on antipsychotic medications, the nurse should be alert to monitor for an increase in which of the following?**

- a. Lack of medication efficacy
- b. Extrapyramidal side effects
- c. Diarrhea
- d. Hypertensive crisis

Grade: 0

User Responses: d.Hypertensive crisis

Feedback: a.Rationale: Asian-American clients often have low metabolic rates and therefore are more prone to side effects, especially extrapyramidal side effects. The medication might be more effective at lower doses due to the low metabolic rate. A hypertensive crisis and diarrhea are not typical side effects of antipsychotic medications.

Cognitive Level: Analysis

Nursing Process: Assessment

Client Need: Physiological Integrity

10. **A staff member reports to the nurse that a client may need more antipsychotic medication because the client's legs have been swinging back and forth rapidly for the past hour while the client has been sitting in a chair. What nursing response is correct?**

- a. Get an order for blood glucose level.
- b. Assess the client for akathisia.
- c. Medicate the client for agitation.
- d. Assess the client for photosensitivity.



Grade: 0

User Responses: d. Assess the client for photosensitivity.

Feedback: a. Rationale: Akathisia is a motor restlessness often experienced by the clients as the need to keep moving their legs. This side effect can be quite distressful to the client and should be assessed. Photosensitivity is not related to restless legs. Medicating the client with an antipsychotic could make the restlessness worse if the problem is akathisia. The client's symptoms are not typical of hypo- or hyperglycemia.
Cognitive Level: Analysis
Nursing Process: Assessment
Client Need: Physiological Integrity

11. **The client with schizophrenia on haloperidol (Haldol) has a mask-like facial expression. The nurse suspects which of the following?**
- a. Early signs of tardive dyskinesia that will be followed by rhythmic tongue movements.
 - b. Labile affect due to the risk of mood instability, particularly hypomania.
 - c. Disinhibition due to chronic use of a conventional antipsychotic medication.
 - d. Either a flat affect as a negative symptom of schizophrenia or a parkinsonian side effect.

Grade: 1

User Responses: d. Either a flat affect as a negative symptom of schizophrenia or a parkinsonian side effect.

Feedback: a. Rationale: A common negative symptom of schizophrenia is a flat affect; however, conventional antipsychotic medications often have parkinsonian side effects of which a mask-like facial expression is common. A labile mood would present with rapid changes in expression. Rhythmic tongue movements are early signs of tardive dyskinesia but are not preceded by a mask-like facial expression. Disinhibition occurs with some anti-anxiety medications, not antipsychotic medications.
Cognitive Level: Analysis
Nursing Process: Assessment
Client Need: Physiological Integrity

12. **Which of the following assessments would indicate that the client's medication management for the treatment of anxiety is therapeutic?**
- a. The client reports taking a lorazepam (Ativan) at the first sign of mild anxiety.
 - b. The client reports having occasional periods of mild anxiety that respond to deep breathing exercises.
 - c. The client reports 3–4 episodes of panic per day.
 - d. The client reports feeling moderate to severe anxiety for at least 2/3 of most days.

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User Responses: d.The client reports feeling moderate to severe anxiety for at least 2/3 of most days.

Feedback: a.Rationale: Therapeutic medication management for anxiety should prevent higher levels of anxiety but allow the client to have low levels of anxiety for which the client can develop coping skills. Experiencing 3-4 panic episodes per day or experiencing moderate to severe anxiety for the majority of most days would not indicate therapeutic medication management. The client should learn not to take pills at the first sign of anxiety because the client would never learn coping skills.
Cognitive Level: Analysis
Nursing Process: Evaluation
Client Need: Physiological Integrity

13. **The client with insomnia asks the nurse why the client is being switched to eszopiclone (Lunesta) from the flurazepam (Dalmane) that the client has been on for three weeks. Which of the following is the correct nursing response to this question?**
- a. Since both medications are chemically the same, it is just an insurance issue.
 - b. Flurazepam is only for short-term use of under a month.
 - c. Eszopiclone is an older medication and less expensive.
 - d. People with insomnia generally sleep more hours on eszopiclone.

Grade: 0

User Responses: d.People with insomnia generally sleep more hours on eszopiclone.

Feedback: a.Rationale: Flurazepam is a benzodiazepine used on consecutive nights of about one month. Eszopiclone is a nonbenzodiazepine sedative-hypnotic and the first approved for long-term use. Eszopiclone is a much newer medication than is Flurazepam. The length of sleep is not appreciably different between the two medications.
Cognitive Level: Application
Nursing Process: Implementation
Client Need: Physiological Integrity

14. **The client with major depressive disorder about to be discharged on fluoxetine (Prozac) 60 mg daily asks the nurse if it would be all right to begin taking St. John's wort again at home. What is the correct nursing response?**
- a. "St. John's wort will probably cause you to gain weight that you do not want."
 - b. "Instead of St. John's wort, you could take kava for your depression."
 - c. "This herbal is a very effective antidepressant and should help you."
 - d. "The interaction of this herbal and antidepressants can cause negative side effects."

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User Responses: d. "The interaction of this herbal and antidepressants can cause negative side effects."

Feedback: a. Rationale: The interaction of St. John's wort and an SSRI can lead to sedative-hypnotic intoxication and should not be taken together. St. John's wort does not generally cause weight gain. Kava is often taken for anxiety, and the nurse should not recommend it for depression or without discussing it with the prescriber.
Cognitive Level: Application
Nursing Process: Implementation
Client Need: Physiological Integrity

15. The client with a rapid cycling mania asks why divalproex is being used and not lamotrigine (Lamictal) that that has been successful for a friend with bipolar disorder. Which of the following is the correct nursing response?
- a. "Ask your prescriber since lamotrigine is generally more effective in mania."
 - b. "You really should not compare medications with family and friends."
 - c. "Studies show that divalproex works better for rapid cycling mania."
 - d. "Your friend must have a seizure disorder since lamotrigine is an anticonvulsant."

Grade: 0

User Responses: d. "Your friend must have a seizure disorder since lamotrigine is an anticonvulsant."

Feedback: a. Rationale: Divalproex generally is more effective for rapid cycling mania and depression. Clients can often compare medications with family and friends to learn more about how they cope with medication management. Family members often respond better to the same medications due to genetic similarities. Even though lamotrigine is an anticonvulsant medication, it is also used to treat bipolar disorder. Divalproex is also used in seizure disorders as well.
Cognitive Level: Application
Nursing Process: Implementation
Client Need: Physiological Integrity

16. Which of the client's behaviors would the nurse expect to either get worse or not improve following an increase in the dosage of lithium?
- a. Insomnia
 - b. Mood lability
 - c. Hand tremors
 - d. Impulsivity

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Grade: 0

User Responses: d.Impulsivity

Feedback: a.Rationale: Hand tremors can be a side effect of lithium and would probably worsen with an increase in lithium levels. Insomnia, impulsivity, and mood lability are all symptoms of mania that should improve with a larger dose of lithium.

Cognitive Level: Application

Nursing Process: Evaluation

Client Need: Physiological Integrity

17. **The client with bipolar disorder just started on lithium, complains of mild depression, and wants to know if an antidepressant will be started. What response, if made by the nurse, is correct?**

- a. Mild depression is initially treated with a mood stabilizer.
- b. An antipsychotic medication is generally added to treat mild bipolar depression.
- c. Antidepressants are never given to clients with bipolar disorder.
- d. High doses of antidepressants are generally given for bipolar depression.

Grade: 0

User Responses: d.High doses of antidepressants are generally given for bipolar depression.

Feedback: a.Rationale: Mood stabilizers will generally cover mild depression initially. Severe depression is treated with a mood stabilizer and antidepressant. High doses of antidepressants could trigger more mania. Antipsychotic medications are not warranted for mild depression.

Cognitive Level: Application

Nursing Process: Implementation

Client Need: Physiological Integrity

18. **Which of the following client statements would indicate that the client understands the clozapine (Clozaril) education?**

Select all that apply.

- a. "I will get up slowly after sitting for awhile."
- b. "I will take the larger dose in the morning so I can stay alert."
- c. "I will have my blood checked weekly for six months."
- d. "I can quit taking this medication when the voices disappear."
- e. "I can expect to lose around three pounds a month."

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Grade: 0

User Responses: d. "I can quit taking this medication when the voices disappear." ,e. "I can expect to lose around three pounds a month."

Feedback:
a.Rationale:
"I will have my blood checked weekly for six months." The risk of agranulocytosis is greater in the first six months of medication therapy, during which time the client has weekly white blood cell counts drawn.

"I will get up slowly after sitting for awhile." Because clozapine can cause hypotension, the client should get up slowly..

"I can expect to lose around three pounds a month." The medication often results in weight gain, not weight loss.

"I can quit taking this medication when the voices disappear." The client should not quit taking the medication without discussing it with the prescriber.

"I will take the larger dose in the morning so I can stay alert." Clozapine can be sedating, and the larger dose is therefore usually taken at bedtime.
Cognitive Level: Analysis
Nursing Process: Evaluation
Client Need: Physiological Integrity

19. **The client's daughter asks the nurse if there is anything new that might help ensure that her mother is actually swallowing her antipsychotic medications and not cheeking them. Which of the following delivery systems for psychiatric medications is the most recent?**
- a. Orally disintegrating tablets
 - b. Short-acting injections
 - c. Liquid formulations
 - d. Depot injections

Grade: 0

User Responses: d.Depot injections

Feedback:
a.Rationale: Many of the newer antipsychotic medications are available in orally disintegrating tablets. Depot injections, shorting-acting injections, and liquid formulations have all been available, even for some of the conventional antipsychotic medications.
Cognitive Level: Application
Nursing Process: Planning
Client Need: Physiological Integrity

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20. A client tells the nurse that she was treated for depression many decades ago and was taken off the medication. She says that she was on something that caused her to feel dizzy when she stood up and to have a dry mouth. Which of the following groups of medications best fits the client's description?
- Anticonvulsant mood stabilizer
 - Tricyclic antidepressant
 - Selective serotonin reuptake inhibitor
 - Subsequent generation antidepressant

Grade: 0

User Responses: d.Subsequent generation antidepressant

Feedback: a.Rationale: Tricyclic antidepressants are among the first medications identified as effective for depression. They had side effects of orthostatic hypotension as well as anticholinergic side effects, such as blurred vision. SSRIs were developed as subsequent generation antidepressants, those antidepressants developed after the TCAs. Anticonvulsant mood stabilizers can be used for treatment of depression but do not commonly cause the side effects that the patient mentioned.

Cognitive Level: Analysis

Nursing Process: Assessment

Client Need: Physiological Integrity

21. During the assessment process, the client tells the nurse that the client was treated with lithium for years until the client began to develop renal problems. Because the client was treated with lithium, the nurse asks the client questions about current symptoms of which of the following disorders?
- Schizophreniform disorder
 - Alzheimer's dementia
 - Bulimia nervosa
 - Bipolar disorder

Grade: 1

User Responses: d.Bipolar disorder

Feedback: a.Rationale: For many years lithium was the most used and effective treatment for manic and hypomanic states of bipolar disorder. Schizophreniform disorder is generally treated with an antipsychotic medication. Bulimia and dementia are not treated with lithium.

Cognitive Level: Application

Nursing Process: Assessment

Client Need: Physiological Integrity

22. A client is admitted with acute symptoms of schizophrenia due to not taking the prescribed olanzapine (Zyprexa) for the past two months. The client's spouse says that the client is to be started on risperidone (Risperdal) Consta and asks why it cannot be started immediately?
- The patient should be stabilized on lithium before an antipsychotic medication is added.
 - Because the client was on olanzapine, a three-month interval is needed between the two medications.
 - The client should be asymptomatic before being started on the Risperdal Consta.
 - Risperdal Consta is a long-acting medication and is started orally to test for side effects.

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User Responses: d. Risperdal Consta is a long-acting medication and is started orally to test for side effects.

Feedback: a. Rationale: Because the Risperdal Consta will be available in the body for a long time, it must be started on an oral trial to make sure that the person will not have any adverse reactions or intolerable side effects. There is no time interval needed between olanzapine and risperidone. The client would not be expected to be without any symptoms before the Risperdal Consta was initiated. Lithium is started often before antipsychotic medications in bipolar disorders, not in schizophrenia.

Cognitive Level: Analysis

Nursing Process: Implementation

Client Need: Physiological Integrity

23. The nurse notes that a newly admitted client was taking fluoxetine (Prozac) at home and was just ordered to begin phenelzine (Nardil). Which of the following nursing responses is most important?

- a. Monitor the client for weight loss.
- b. Assess the client's risk for suicide.
- c. Hold the medication and contact the prescriber.
- d. Teach the patient about the new dietary changes.

Grade: 0

User Responses: d. Teach the patient about the new dietary changes.

Feedback: a. Rationale: Fluoxetine and an MAOI together may cause serious and fatal interactions. Fluoxetine has a long half-life and may still be present in the client. If the client were started on an MAOI, the client would need dietary teaching, but this is not the priority now. Phenelzine should not trigger weight loss, and assessing the client for suicide is not a priority over the potentially fatal interaction.

Cognitive Level: Analysis

Nursing Process: Planning

Client Need: Physiological Integrity

24. An older adult client is on risperidone (Risperdal) 1 mg at bedtime for the treatment of a behavioral issue related to dementia. The family member asks why the client dose is so low since the family member's sibling with schizophrenia is on 8 mg of risperidone daily. Which of the following nursing responses is correct?

- a. The family member should call the psychiatrist about this.
- b. The risperidone will be eventually increased.
- c. The sibling is on a very high dose for any age.
- d. Lower doses are effective in older clients.

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User Responses:

d. Lower doses are effective in older clients.

Feedback:

a. Rationale: Due to changes in metabolism and other physiologic factors, antipsychotic medications are effective at reduced doses in older adults. The sibling is not on a very high dose of risperidone. The risperidone will not necessarily be increased. Educating family members about medications is a role of the nurse.

Cognitive Level: Analysis

Nursing Process: Implementation

Client Need: Physiological Integrity

Activity Name: Chapter 07 Pre Test

1. d. The symptoms of serious mental illness are due to physiological changes in the brain.
2. a. Psychopharmacology knowledge continually grows due to new research and clinical practice.
3. d. What medications do you take that are prescribed by any of your health care providers? and a. What medications do you buy without a prescription, such as aspirin, laxatives, antacids, and the like? and e. What herbals and nutritional supplements do you take? and c. What medications do you take for your mental illness?
4. b. "Whereas Celexa increases one chemical related to depression, Effexor increases two."
5. c. The antipsychotic medications regulate and generally decrease the amount of dopamine that binds to receptor sites.
6. d. Since bupropion has a different mechanism of action, it can be added to an SSRI.
7. d. Reduced effectiveness of the medication at the usual starting dose
8. d. High expressed emotionality is related to poorer prognosis.
9. b. Extrapyramidal side effects
10. b. Assess the client for akathisia.
11. d. Either a flat affect as a negative symptom of schizophrenia or a parkinsonian side effect.
12. b. The client reports having occasional periods of mild anxiety that respond to deep breathing exercises.
13. b. Flurazepam is only for short-term use of under a month.
14. d. "The interaction of this herbal and antidepressants can cause negative side effects."
15. c. "Studies show that divalproex works better for rapid cycling mania."
16. c. Hand tremors
17. a. Mild depression is initially treated with a mood stabilizer.
18. c. "I will have my blood checked weekly for six months." and a. "I will get up slowly after sitting for awhile."
19. a. Orally disintegrating tablets
20. b. Tricyclic antidepressant
21. d. Bipolar disorder
22. d. Risperdal Consta is a long-acting medication and is started orally to test for side effects.
23. c. Hold the medication and contact the prescriber.
24. d. Lower doses are effective in older clients.