



Question: 1 of 60

Time Elapsed: 00:00:44
Pause Remaining: 08:20:00

PAUSE



FLAG

A nurse is discussing the home care of a client who has advanced Alzheimer's disease with the client's partner, who is planning to go out of town for several days. Which of the following resources should the nurse recommend to the caregiver?



- Respite care
- Partial hospitalization
- Adult day care program
- Geropsychiatric unit

CONTINUE



Question: 2 of 60

Time Elapsed: 00:01:23
Pause Remaining: 08:20:00

PAUSE



FLAG

A home health nurse is assessing an older adult client whose sibling is the primary caregiver. Which of the following findings should the nurse identify as a possible indicator of neglect?



- Increased confusion
- Sleep disturbances
- Cluttered environment
- Inappropriate dress

PREVIOUS

CONTINUE



Question: 3 of 60

Time Elapsed: 00:01:42
Pause Remaining: 08:20:00



A nurse is teaching a client who has a depressive disorder about fluoxetine. Which of the following information should the nurse include in the teaching?



- "You might notice an increase in saliva while taking this medication."
- "You might experience difficulties with sexual functioning while taking this medication."
- "You should expect an improvement in symptoms of depression in 3 to 4 days."
- "You may notice a temporary ringing in the ears when starting this medication."





Question: 4 of 60

Time Elapsed: 00:02:19
Pause Remaining: 08:20:00

PAUSE



FLAG

A nurse is planning care for a client who is experiencing acute mania. Which of the following interventions should the nurse include in the plan to promote sleep?



- Have the client participate in a morning aerobics group.
- Encourage frequent rest periods throughout the day.
- Provide a distraction such as television at night.
- Offer the client hot chocolate at bedtime.

PREVIOUS

CONTINUE



Question: 5 of 60

Time Elapsed: 00:02:50
Pause Remaining: 08:20:00

PAUSE



FLAG

A nurse is reviewing routine laboratory values for several clients who are taking lithium carbonate. Which of the following clients should the nurse assess further for findings indicating lithium toxicity?



- A client who has a fasting blood glucose level of 80 mg/dL
- A client who has a sodium level of 128 mEq/L
- A client who has a BUN of 18 mg/dL
- A client who has a potassium level of 3.6 mEq/L

PREVIOUS

CONTINUE



Question: 6 of 60

Time Elapsed: 00:03:24
Pause Remaining: 08:20:00

PAUSE



FLAG

A nurse is caring for an older adult client who has dementia and has wandered into the day room looking for their deceased partner. Which of the following actions should the nurse take?



- Move the client to a room near the nurses' station.
- Limit visitors until the client is oriented to the environment.
- Tell the client that their partner is deceased.
- Talk with the client about activities they enjoyed with their partner.

PREVIOUS

CONTINUE



Question: 7 of 60

Time Elapsed: 00:03:45
Pause Remaining: 08:20:00



A client who has paranoid schizophrenia is attending a treatment planning conference with a family member. During the discussion of the medication adherence portion of the plan, a nurse notices that the family member seems distracted. Which of the following actions should the nurse take?



- Call the family member to the side to inquire if they have questions or concerns about the treatment plan.
- Advise the family member that this treatment plan has been developed specifically for the client to follow.
- Ask the family member if they have any thoughts or questions about the treatment plan.
- Document that the family member does not support the medication treatment plan.





Question: 8 of 60

Time Elapsed: 00:04:09
Pause Remaining: 08:20:00



A nurse is obtaining a mental health history from an older adult client. Which of the following actions should the nurse plan to take?



- Raise the pitch of the voice when speaking to the client.
- Begin the interview by explaining the plan of care.
- Interview the client in a private setting.
- Ask the client to complete a detailed questionnaire.





Question: 9 of 60

Time Elapsed: 00:07:53
Pause Remaining: 08:20:00



A nurse is planning care for a client who has schizophrenia and reports auditory hallucinations. Which of the following interventions should the nurse include in the plan?



- Promote the use of music to compete with the client's auditory hallucinations.
- Inform the client that the auditory hallucinations are not real.
- Avoid asking the client if they are experiencing auditory hallucinations.
- Instruct the client on the use of voice recognition regarding the auditory hallucinations.





Question: 10 of 60

Time Elapsed: 00:08:11
Pause Remaining: 08:20:00



A nurse is admitting a female client who has anorexia nervosa. Which of the following manifestations should the nurse expect during the admission assessment?



- Diarrhea
- Heavy menstrual bleeding
- Tachycardia
- Orthostatic hypotension



Question: 11 of 60

Time Elapsed: 00:08:45
Pause Remaining: 08:20:00

PAUSE



FLAG

A nurse is caring for a client who has a recent diagnosis of mild Alzheimer's disease. The client's partner asks the nurse about expected manifestations. The nurse should teach the partner to expect which of the following manifestations to occur first?



- Inability to recognize family members
- Chooses clothing that is inappropriate for the weather
- Exhibits a change in personality
- Frequently misplaces objects

PREVIOUS

CONTINUE

Question: 12 of 60

Time Elapsed: 00:09:11
Pause Remaining: 08:20:00

PAUSE



FLAG

A nurse is admitting a client who has alcohol use disorder. Which of the following statements by the client indicates that the client is using denial as a defense mechanism?



- "I put in extra hours at work so I won't think about drinking."
- "I know that wine is good for my heart, so that's why I drink some each evening."
- "I make up for my drinking by taking my partner on nice vacations."
- "I am able to go to work every day, so I don't have a problem."

PREVIOUS

CONTINUE

Question: 13 of 60

CORRECT

Time Elapsed: 00:11:18
Pause Remaining: 08:20:00

PAUSE

FLAG

A nurse on a mental health unit is caring for a recently admitted client.

For each potential assessment finding, click to specify if it is a positive or negative symptom of schizophrenia.

Exhibit 1 Exhibit 2

Vital Signs

0800:

Blood pressure 110/78 mm Hg
Heart rate 76/min
Respiratory rate 18/min
Temperature 37° C (98.6° F)

1200:

Blood pressure 116/80 mm Hg
Heart rate 88/min
Respiratory rate 20/min
Temperature 38° C (100.4° F)



Assessment Findings	Positive Symptoms	Negative Symptoms
Absence of intonation in speech	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Withdrawal from social activities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Delusions of grandeur	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alogia	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Catatonia	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Clang associations	<input checked="" type="checkbox"/>	<input type="checkbox"/>

CORRECT

My Answer

Delusions of grandeur, clang associations, and catatonia are consistent with positive symptoms of schizophrenia. Positive symptoms, the presence of symptoms that are not ordinarily present, include hallucinations, delusions, paranoia, and disorganized or bizarre thoughts, behaviors, or speech.

Absence of intonation in speech, alogia, and withdrawal from social activities are consistent with negative symptoms of schizophrenia. Negative symptoms, or the absence of something that should be present, include lack of goal-directed behavior, decrease in participation in social activities, and a flat affect.

Question: 14 of 60

Time Elapsed: 00:11:43
Pause Remaining: 08:20:00

PAUSE



FLAG

A nurse in an outpatient mental health setting is collecting a health history from a client who is taking paroxetine for depression. The client reports to the nurse that he also takes herbal supplements. The nurse should advise the client that which of the following supplements interacts adversely with paroxetine?

St. John's wort

Saw palmetto

Echinacea

Ginkgo

PREVIOUS

CONTINUE

Question: 15 of 60

Time Elapsed: 00:12:44
Pause Remaining: 08:20:00

PAUSE



FLAG

A nurse is caring for a group of clients. Which of the following findings is the nurse required to report?



- A client who has bipolar disorder and tested positive for genital herpes simplex virus reports having multiple sexual partners.
- A client who has depression reports having a lack of interest in assisting their partner in the care of their children.
- A client who has borderline personality disorder threatened to harm their roommate.
- An adolescent client who has anorexia nervosa has a BMI of 17.

PREVIOUS

CONTINUE

Question: 16 of 60

Time Elapsed: 00:13:03
Pause Remaining: 08:20:00

PAUSE



FLAG

A charge nurse is preparing an educational session for a group of newly licensed nurses to review client rights under the law. Which of the following statements should the nurse make?



- "Information regarding clients should remain confidential until after their death."
- "Failure to report suspected maltreatment or neglect of a disabled adult is a felony in all states."
- "As long as client identity is disguised, their health information can be shared between professionals on the internet."
- "In the event a client threatens harm to others, medications can be administered without consent."

PREVIOUS

CONTINUE

Question: 17 of 60

Time Elapsed: 00:13:23
Pause Remaining: 08:20:00

PAUSE



FLAG

A community health nurse is planning an education program about depressive disorders. Which of the following factors should the nurse include as increasing the risk for depression?



- Male gender
- Hyperthyroidism
- Substance use disorder
- Being married

PREVIOUS

CONTINUE

Question: 18 of 60

Time Elapsed: 00:13:46
Pause Remaining: 08:20:00



A nurse is planning care for a 7-year-old child who has ADHD. Which of the following interventions should the nurse identify as the priority?



- Decrease distractions during meal times.
- Provide positive feedback when the child completes a task.
- Clearly identify consequences for unacceptable behavior.
- Remove unnecessary equipment from the child's surroundings.



Question: 19 of 60

Time Elapsed: 00:14:06
Pause Remaining: 08:20:00



A nurse in a mental health clinic is caring for a client who has bipolar disorder and reports that they stopped taking lithium 2 weeks ago. The nurse should recognize which of the following as an expected adverse effect that might have caused the client to stop taking the medication?



- Sore throat
- Photophobia
- Hand tremors
- Constipation



Question: 20 of 60

Time Elapsed: 00:14:34
Pause Remaining: 08:20:00



A client who has a diagnosis of depression is attending group therapy. During the group meeting, the nurse asks each member to identify one goal for the day. When it is the client's turn, they do not respond. Which of the following actions should the nurse take before repeating the request to the client?



Allow the client time to formulate an answer.

Prompt the client to give a response.

Move on to the next client.

Offer the client a suggestion for a goal.

PREVIOUS

NEXT