

{NGN} ATI MENTAL HEALTH 2023 VERSION A , B , C , PROCTORED EXAM AND ATI MENTAL HEALTH PROCTORED RETAKE EXAM | AGADE

VERSION A

1. A nurse is teaching a client who has schizophrenia about her new prescription for risperidone. Which of the following statements should the nurse include in the teaching?

- a) "You should continue this medication if you develop muscle rigidity".
- b) "You will experience weight loss while taking this medication."
- c) "You will notice your symptoms improve within 24 hours of taking this medication."
- d) "You should increase your consumption of complex carbohydrates."

2. The nurse is caring for a client following a physical assault. The client states "I don't remember what happened to me." The nurse should recognize that the client is using which of the following defense mechanisms?

- a) Repression
- b) Displacement
- c) Rationalization
- d) Denial

3. A nurse is caring for a client who has anorexia nervosa. Which of the following findings require immediate intervention by the nurse?

- a) +2 edema of the lower extremities
- b) BUN 21 mg dL
- c) Lanugo covering the body
- d) Blood pH 7.60

4. A nurse is caring for a client in a mental health facility. The client is agitated and threatens to harm herself and others. Which of the following is the priority intervention?

- a) Place the client in restraints
- b) Administer an anti-anxiety medication to the client
- c) Put the client in seclusion
- d) Set limits on the client's behavior**

5. A nurse is caring for a client who was involuntarily committed and is scheduled to receive electroconvulsive therapy (ECT). The client refuses the treatment and will not discuss why with the health care team. Which of the following actions should the nurse take?

- a) Ask the client's family to encourage the client to receive ECT
- b) Inform the client that ECT does not require a consent.
- c) Document the client's refusal of the treatment in the medical record.**
- d) Tell the client he cannot refuse the treatment because he was involuntarily committed.

6. A nurse in the emergency department is caring for a client who reports feeling sad, worthless, and hopeless 9 months after the death of her son. Which of the following actions should the nurse take first?

- a) Request a mental health consult for the client.
- b) Ask the client if she has thought about harming herself.
- c) Encourage the client to attend a grief support group.
- d) Discuss the client's coping skills.**

7. A nurse is caring for a client who has borderline personality disorder and has been engaging in self-mutilation. The nurse should encourage the client to participate in which of the following groups.

- a) Dual diagnosis treatment group
- b) Dialectical treatment group**
- c) Desensitization therapy
- d) Co-dependents support group.

8. The nurse is reviewing the medication administration record of a client who has schizophrenia. The nurse should plan to initiate the Abnormal Involuntary Movement Scale to monitor for adverse effects of which of the following medications.?

- a) Amantadine
- b) Diphenhydramine
- c) Benztropine
- d) Haloperidol**

9. A nurse is counseling a client following the death of a client's partner 8 months ago. Which of the following client statements indicates maladaptive grieving?

- a) I am so sorry for the times I was angry with my partner.
- b) I find myself thinking about my partner often.
- c) I still don't feel up to returning to work.**
- d) I like looking at his personal items in the closet.

10. A nurse is caring for a client who has borderline personality disorder. Which of the following outcomes should the nurse include in the treatment plan?

- a) The client will report a decrease in hallucinations.
- b) The client will communicate needs
- c) The client will verbalize improved mood**
- d) The client will attend to personal hygiene.

11. A nurse is caring for a client who is prescribed massage therapy to treat panic disorder. The client states "I can't stand to be touched by another person." Which of the following responses should the nurse make?

- a) Why don't you like to be touched by others?
- b) Don't worry about it. Your anxiety will lessen once the massage begins.
- c) I will tell your provider you would like a treatment other than a massage.**
- d) I will request that the massage therapist wear gloves during your treatment.

12. A nurse is creating a plan of care for a client who has major depressive disorder. Which of the following interventions should the nurse include in the plan?

- a) **Encourage physical activity for the client during the day**
- b) Discourage the client from expressing feelings of anger
- c) Keep a bright light on in the client's room at night.
- d) Identify and schedule alternative group activities for the client.

13. A nurse is providing counseling for a family that consists of two parents and their two adolescent children. Which of the following family members should the nurse identify as acting in the role as the monopolizer?

- a) The mother who expresses hostility toward her spouse.
- b) The adolescent son who refuses to share personal feelings.
- c) The father who intervenes whenever the siblings argue.
- d) **The adolescent daughter who attempts to dominate the conversation.**

14. A nurse is developing a teaching plan for the family of an older adult client who is to receive transcranial magnetic stimulation. Which of the following information should the nurse include in the teaching plan?

- a) **The client might have a headache after treatment.**
- b) The client will experience seizure during treatment.
- c) The client will require intubation after treatment.
- d) The client is at risk for aspiration during treatment.

15. A nurse is providing teaching about disulfiram to a client who has a history of alcohol use. Which of the following instructions should the nurse include in the teaching? (Select all that apply)

- a) **"You will need to take the medication once daily"**
- b) "You will receive treatment in an inpatient setting"
- c) **"You should avoid using mouthwash that contains alcohol"**
- d) "You should avoid drinking carbonated beverages while taking the medication"
- e) "You can expect to develop a physical dependence to the medication"

16. A nurse is caring for a client who is in the manic phase of bipolar disorder. Which of the following actions should the nurse take?

- a) **Avoid power struggles by remaining neutral**
- b) Allow the client to set limits for his behavior
- c) Provide in-depth explanation of nursing expectations
- d) Encourage the client to participate in group activities

17. A nurse is assessing a young adult female client for schizophrenia. Which of the following findings should the nurse identify as a risk factor for this condition?

- a) Environmental stress
- b) Gender
- c) Depression
- d) **Birth order**

18. A nurse is providing discharge teaching about manifestations of relapse to the family of a client who has schizophrenia. Which of the following information should the nurse include in the teaching?

- a) The client exhibits an inflated sense of self
- b) **The client develops an inability to concentrate**
- c) The client increases participation in social activities
- d) The client begins sleeping more than usual

19. A nurse is assessing a client who is restless and constantly mutters to himself. Which of the following findings should lead the nurse to suspect delirium?

- a) The client is unable to recognize objects.
- b) **The client manifestations developed suddenly**
- c) The client has a flat affect
- d) The client's speech is slow and repetitious