

1. A female client is brought to the emergency department after police officers found her disoriented, disorganized, and confused. The RN also determines that the client is homeless and is exhibiting suspiciousness. The client's plan of care should include what priority problem?
 - ❖ Acute confusion
2. Following involvement in a motor vehicle collision, a middle-aged adult client is admitted to the hospital with multiple facial fractures. The client's blood alcohol level is high on admission. Which PRN prescription should be administered if the client begins to exhibit signs and symptoms of delirium tremens (DTs)?
 - ❖ Lorazepam (Ativan) 2mg IM.
3. Several clients with chronic mental illness and multiple substance abuse histories live in a group residential home and attend a daycare mental health facility where group and individual therapies are provided. The nurse finds the common bathroom at the facility with sputum on the walls, urine in the sink and on the floors, and the toilet stopped up with tissue, paper towels, and feces. What is the priority issue that the nurse should address?
 - ❖ Infection control.
4. A male college student visits the student health center for his annual physical examination. His vital signs and blood glucose level are within normal range. His height is 6 feet 1 inch (185.4 cm), and he weighs 135 pounds (61.36kg). What additional information is most important for the nurse to obtain?
 - ❖ Body mass Index
5. On admission to the mental health unit, a client diagnosed with schizophrenia tells the nurse that he is the son of God. Based on this statement, which intervention should the nurse include in this client's plan of care?
 - ❖ Confront his delusion as not consistent with reality.
6. Which client statement suggests to the nurse that the client is using the defense mechanism of projection to deal with anxiety related to admission to a psychiatric unit?
 - ❖ I am here because the police that I was doing something wrong.
7. A middle-aged female client with no previous psychiatric history is seen in the mental health clinic because her family describes her as having paranoid thoughts. On assessment, she tells the nurse, "I want to find out why these people are stalking me!" Which response should the nurse provide?
 - ❖ "It sounds like this experience is frightening for you."
8. a male client tells the nurse that he has an IQ of 400+ and is a genius and an inventor. He also reports that he is married to a female movie star and thinks that his brother wants a sexual relationship with her. What is the priority nursing problem for admission to the psychiatric unit?
 - ❖ Ineffective sexual patterns.
9. The occupational health nurse is working with a female employee who was just notified that her child was involved in a motor vehicle collision and taken to the

hospital. The employee states, "I can't believe this. What should I do?" Which response is best for the nurse to provide in this crisis?

❖ Call for transportation to the hospital.

10. The nurse is working with a male client at a community mental health center when the client reports hearing voices that tell him to get a knife from the kitchen and hurt himself. What intervention is most important for the nurse to implement?

❖ Assign the UAP to remain with the client at all times.

11. A female client on a psychiatric unit is sweating profusely while she vigorously does push-ups and then runs the length of the corridor several times before crashing into the furniture in the sitting room. Picking herself up, she begins to toss chairs aside, looking for a red one to sit in. When another client objects to the disturbances, the client shouts, "I am the boss here. I do what I want." Which nursing problem best supports these observations

❖ Risk for other related violence related to disruptive behavior.

12. The nurse documents that an adult male client who is depressed sleeps until lunch time and refuses to take telephone calls from his family. Which assessment is most accurate for the nurse to include in the nursing notes in the electronic medical record?

13. A client is receiving benztropine mesylate (Cogentin) for drug-induced extrapyramidal syndrome (EPS). Which finding indicates that the nurse should further evaluate the client?

❖ Presence of a dry mouth.

14. The mother of an 8-month-old infant with profound mental and physical disabilities tells the nurse how depressed she is because she realizes that her child will never achieve normal growth and development milestones. How should the nurse respond to this mother?

❖ Ask the mother if she has ever thought about harming herself or her child.

15. A male client who is psychotic is communicating using nonverbal charade-like hand motions and appears to be interacting with a hallucination. What approach should the nurse use to encourage the client to communicate verbally?

16. A young adult female client is admitted to the emergency department after being raped in a shopping center parking lot. The client expresses no suicidal ideation, but expresses feelings of self-blame for not taking precautions when going to her car. According to theorists, such as Maslow and Erikson, this client is struggling with which issue?

17. During the admission assessment to the mental health unit, a client reports that the people at the office, where the client works, are antagonistic and the client is thinking of shooting the supervisor. The client asks the nurse not to reveal this to anyone else. The nurse immediately notifies the client's supervisor and shares the client's thoughts. The therapist then calls the client's supervisor and shares the client's thoughts about shooting the supervisor. What outcome is appropriate based on the action of the nurse?

- ❖ The nurse and therapist will be asked to educate other team members on appropriate sharing of client information.
18. When developing a plan of care for a client admitted to the psychiatric unit following aspiration of a caustic material related to a suicide attempt, which nursing problem has the highest priority?
- ❖ Ineffective breathing patterns.
19. An older homeless client visits the psychiatric clinic to obtain a prescription renewal for alprazolam (Xanax). During the health assessment, the client complains of chest pain. Which action should the nurse take first?
- ❖ Determine if Xanax was taken recently.
20. A male client in the mental health unit is guarded and vaguely answers the nurse's questions. He isolates in his room and sometimes opens the door to peek into the hall. Which problem can the nurse anticipate?
- ❖ Delusions of persecution.
21. Which client information indicates the need for the nurse to use the CAGE questionnaire during the admission interview?
- ❖ Describes self as a social drinker who drinks alcoholic beverages daily.
22. A young adult with eroded tooth enamel presents to the clinic with multiple complaints including severe pain in the chest and upper abdomen that occurred when the client induced vomiting after eating a large breakfast. The client also reports severe heartburn in the last week and describes a history of taking laxatives and eating prunes whenever overeating. What client problem should the nurse address first?
23. A homeless client who reports feeling sad and depressed tells the mental health nurse that in the past two days the client she has only had four hours of sleep. Which action is most important for the nurse to implement within the first 24 hours after treatment is initiated?
- ❖ Allow the client to rest and sleep.
24. The nurse documents the mental status of a female client who has been hospitalized for several days by court order. The client states, "I don't need to be here," and tells the nurse that she believes that the television talks to her. The nurse should document these assessment statements in which section of the mental status exam?
- ❖ Insight and judgment.