

Quiz 2 Psychotherapy & group therapy quiz

1. Which section of the Mental Status exam would one document gait, tics and hand wringing?

Affect

Speech

Motor activity

Extracorporeal findings

2. A 29-year-old woman with a history of panic disorder requests a psychiatric home visit because she continues to experience feelings that her environment is not real. She states that this is very unsettling and, as a result, has stopped going out of her home. In formulating her case, the PMHNP would describe this symptom as the persistence of:

Depressive symptoms

Depersonalization

Derealization

Psychosis

3. Pam is 22 yr old female who lives alone and has Bipolar disorder documented as F31.2 (Manic, Severe with psychotic features). Pam stopped taking her Quetiapine and Lithium medications. Pam's delusions are worsening and she has been awake for 36 hours. Does the PMHNP have the right to share this information with Pam's mother who lives in a neighboring state?

Yes, Pam does not currently have the capacity to make decisions given her chief complaint, presentation and history of a serious mental illness.

Yes, because the health care provider can always reach out to family as long as the information is limited to what is needed.

No, because Pam has not signed a medical release form and is actively participating in her care as evidenced by showing up to the visit.

No, because Pam is an adult and HIPAA protects private mental health information.

If the PMHNP believes that the client does not have the capacity to agree or object to the sharing information at that critical time and the sharing of the

information would be in the clients best interest, the provider may discuss the pertinent information only to the family member who can possibly help with the clients immediate care concerns. 45 CFR 164.510(b)

4. Mr. Yoon is a 46-year-old male who was referred from the employee assistance program for interpersonal difficulties in the workplace. His boss states that he is very committed to his job, often working late, but he is unable to tolerate any criticism of his work and becomes argumentative and frequently irritable with his coworkers. He never seems to socialize at company events and seems to not speak of any family or friends outside of work. He has become so difficult to work with that termination is possible, but fear persists of a homicidal threat. What should the PMHNP do when seeing this patient?

Call 911 and transfer the patient to the hospital

Encourage the patient to find another job

Prescribe the patient a selective serotonin reuptake inhibitor (SSRI) to reduce anxiety

Inquire about access to weapons

5. A 38-year-old investment banker reveals that on weekends he visits the Delightful Dungeon and pays a dominatrix to tie him up, humiliate him, and whip him. He finds these sessions painful but very sexually arousing. He is able to become aroused and climax without this experience but finds this activity novel and has no desire to stop. Which of the following diagnosis is most likely?

Sexual sadism

Atypical depression

No diagnosis

Sexual masochism

6. A client with generalized anxiety disorder is asked to create coping cards as part of her CBT homework. What is the primary purpose of using coping cards in CBT?

To identify anxiety provoking situations To

document automatic thoughts

To provide immediate cognitive restructuring strategies

To record daily fluctuations in thoughts and corresponding moods

Coping cards are used to write down helpful thoughts and strategies that the client can refer to when experiencing distress, providing immediate cognitive restructuring support.

7. A 45-year-old female presents with symptoms of major depressive disorder. During Interpersonal Psychotherapy (IPT), the PMHNP identifies significant conflicts with her spouse as a contributing factor to her depression. Which of the following IPT focus areas is most relevant to this patient's situation?

Interpersonal beliefs and deficits

Interpersonal disputes

Role transitions

Grief

Interpersonal disputes are conflicts with significant others, which align with the patient's conflicts with her spouse.

8. Which of the following is NOT part of the OARS technique in Motivational Interviewing?

Reflections

Solutions

Open ended questions

Affirmations

OARS stands for Open-ended questions, Affirmations, Reflections, and Summarizations. Solutions are not part of the OARS technique

9. A psychodynamic therapist is working with a patient who has difficulty forming stable and healthy relationships. The therapist explores the patient's early relationships with caregivers to understand these patterns. Which psychodynamic theory is the therapist primarily using?

Ego Psychology

Schema theory

Object Relations Theory

Selective abstraction theory

Object Relations Theory focuses on the internalized representations of early relationships and their impact on current relationship patterns.

10. A client with generalized anxiety disorder (GAD) often worries about minor issues escalating into major catastrophes. During a CBT session, the therapist uses the downward arrow technique to explore the underlying fears associated with these worries. What is the goal of this technique?

To accept the distress of the thought and build tolerance for future periods of anxiety

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To increase present focused awareness

To identify client core beliefs

The downward arrow technique involves asking a series of questions to uncover deeper, underlying beliefs that contribute to the patient's anxiety. The goal is to identify and challenge these core beliefs to reduce the intensity of the clients worries.

11. The mental status exam includes all of the following except:

Mood and affect

Appearance and behavior

Insight and judgement

Cranial nerves and reflexes

12. A 66-year-old woman employed as a federal appeals lawyer is being seen by the PMHNP accompanied by her son, who has been concerned about progressive memory problems. Which of the following would be most helpful in distinguishing between common forgetfulness and cognitive impairment?

Family history

Montreal Cognitive Assessment (MoCA)

Brain MRI with and without contrast

Hamilton Depression Scale (HAM-D)

13. The PMHNP is facilitating a closed support group for victims of domestic violence and a member shares she is ready to leave her abuser. What would be the best response?

“I am glad you are able to stand up for yourself.” “Where will you go?”

“What plans have you implemented?”

“Abusers escalate their aggression when the victim tries to leave.”

14. The PMHNP is explaining the risks and benefits of long-acting injectable antipsychotics to a patient with a history of medication nonadherence. The patient is asking logical questions that demonstrate he can understand the facts. Which process of changing represents the patient’s position?

Consciousness raising

Social liberation

Reinforcement management

Self-liberation

15. A 35-year-old female victim of sexual assault is fearful of getting into any more relationships but expresses dissatisfaction at the prospect of being alone forever. What therapeutic technique would be most appropriate for this patient?

Psychopharmacology

Psychoanalysis

Cognitive behavioral therapy

Dialectical behavioral therapy