

**UNIVERSITY OF SWAZILAND**  
**FACULTY OF HEALTH SCIENCES**  
**DEPARTMENT OF COMMUNITY HEALTH NURSING SCIENCE**  
**FINAL EXAMINATION: DECEMBER, 2016**

**COURSE TITLE: INTRODUCTION TO MENTAL HEALTH/PSYCHIATRIC NURSING**

**COURSE CODE: CMH 307**

**TIME ALLOCATED: 2 HOURS**

**TOTAL MARKS ALLOCATED: 75**

**INSTRUCTIONS:**

- 1. THE PAPER HAS THREE QUESTIONS; PLEASE ANSWER ALL OF THEM**
- 2. USE THE PROVIDED ANSWER BOOKLET FOR ALL YOUR ANSWERS**
- 3. START A NEW QUESTION IN A NEW PAGE**
- 4. MAKE SURE THAT ALL YOUR ANSWERS ARE NUMBERED CORRECTLY**
- 5. PLEASE WRITE CLEARLY AND LEGIBLY**

**DO NOT OPEN THE QUESTION PAPER UNTIL PERMISSION HAS BEEN GRANTED BY THE CHIEF INVIGILATOR OR HIS/HER REPRESENTATIVE**

## QUESTION 1

**This question has two sections: A (multiple choice) and B (true or false). Answer both sections. Each correct answer carries one (1) mark.**

1. All of the following are key attributes of a mental health nurse, *except*:
  - a. Knowledgeable about mental health
  - b. Sympathetic
  - c. Observant
  - d. Good listener
  
2. This process required for the systematic diagnosis by psychiatrists and psychologists of psychological disorders:
  - a. Matching a person's symptoms with disorders in the diagnostic manual
  - b. Interviewing family and friends to find out about deviant behaviours
  - c. Performing medical tests and brain scans on in-patients
  - d. Applying statistical formulas to examine the frequency of behaviours
  
3. -----is a process whereby nurses interpret data collected during assessment and apply standardised labels to clients' health problems and responses to illness
  - a. Nursing process
  - b. Nursing diagnosis
  - c. Nursing evaluation
  - d. Nursing care goal setting
  
4. Mr. X is brought to the psychiatric hospital for the first time. What should the nurse do for him?
  - a. Take a comprehensive psychiatric history
  - b. Do only a mental status examination
  - c. Refer Mr. X to the psychiatrist
  - d. Refer Mr X to the senior psychiatric nurse
  
5. The purpose of mental status examination is to:
  - a. Obtain a comprehensive cross-sectional description of a patient's current mental functioning
  - b. Obtain a comprehensive history of patient's mental illness
  - c. Obtain comprehensive description of patient's medical and psychological history
  - d. All of the above
  
6. All of the following can conduct a mental status examination, *except*:
  - a. Physician
  - b. Psychiatrist
  - c. Psychologist

- d. Counsellor
7. Which of the following is not a component of a mental status examination?
- General appearance and behaviour
  - Content and processing of thoughts
  - Speech, mood and affect
  - History of previous mental illness
8. Which statement is most accurate regarding the assessment of patients diagnosed with psychiatric problems?
- Medical history is of little significance and can be eliminated from the nursing assessment.
  - Assessment provides a holistic view of the client including bio-psychosocial aspects.
  - Comprehensive assessments can be performed only by advanced practice nurses.
  - Psychosocial evaluations are gained by subjective reports rather than objective observations.
9. During a mental status examination, Nurse Mamba asks the patient how she was feeling. In between sobs, the patient responds that she was very happy. Which statement best describes the scenario?
- The patient's affect is incongruent with her mood
  - The patient's thought process is incoherent
  - The patient's memory is sad
  - The patient has poor insight and judgement
10. You are on night duty when a patient is brought to the acute ward with a history of attempted suicide. The reason for the attempt on her life is that she has failed her final year at the university. What would be the best initial intervention for the patient?
- Call the psychiatrist and report the case
  - Give the patient a strong sedative and report to psychiatrist in the morning
  - Lock the patient in a seclusion room
  - Obtain more history on the chief complaint from the patient and relatives who brought her to hospital.

**CASE:** Melusi is a 25-year-old male nursing student at one of the local universities and is your roommate. You've observed that Melusi repeatedly washes his hands several times per hour, checks the electrical appliances three times each morning, and checks the doors in your room to make sure they are locked before he leaves for class. When you asked him about this behavior, he confided that he has a strong urge of repetitive actions which has been going on since he was nine years old, and is tired of wasting time by repeating these actions, but cannot help it, and is causing him a lot of emotional distress. Questions 11-15 relate to this case.

11. Based on the provided history, Melusi is most likely suffering from which disorder?
- Anxiety disorder
  - Obsessive-Compulsive personality disorder
  - Obsessive compulsive disorder
  - Psychotic disorder
12. In DSM-5, Melusi's disorder is classified as:
- Schizophrenia spectrum and other psychotic disorders
  - Obsessive-Compulsive and Related disorders
  - Anxiety disorders
  - Trauma and stressor-related disorders
13. What is the recommended first line therapy for Melusi's disorder?
- Cognitive behavioral therapy
  - Anti-anxiety drugs
  - Antidepressants
  - All of the above
14. Which of the following disorders is not classified in class as Melusi's disorder
- Hoarding disorder
  - Body dysmorphic disorder
  - Excoriation disorder
  - Antisocial disorder
15. Nursing implications for Melusi's therapy include all of the following, *except*:
- Help the patient to recognise things that provoke obsessive thoughts and ritualistic behaviors and the relationship between them
  - Educate the patient and family members about the therapy, its rationale, procedure and anticipated outcomes
  - Keep track of patient's therapeutic response and provide feedback to mental health care team including patient and family
  - All of the above
16. The goal of the therapy in Q11 is to
- help the patient learn to recognise negative patterns of thought, evaluate their validity, and replace them with healthier ways of thinking
  - extrinsically control patients' thoughts and feelings
  - influence patients' behaviour to conform to that desired by the psychotherapist
  - all of the above
17. The following outcome was developed by a mental health nurse for a patient in a recovery ward: "Client will list five personal strengths by the end of day 1." Which

correctly written nursing diagnostic statement most likely generated the development of this outcome?

- a. Altered self-esteem related to emotional abuse as evidenced by self-deprecating statements
  - b. Self-care deficit related to altered thought processes
  - c. Disturbed body image related to major depressive disorder as evidenced by mood rating of 2/10
  - d. Risk for disturbed self-concept related to hopelessness as evidenced by suicide attempt
18. A number of patients are seen by OPD staff and psychiatrist at the National psychiatric centre, and recommend that they should be admitted in the acute ward. However, there is only one bed available. Which patient should be prioritised for admission?
- a. Patient experiencing hand tremors and needs to have her medication adjusted
  - b. Patient presenting with anxiety and sad mood after separation from her longtime boyfriend and father to her child
  - c. Patient who is a single parent who hears voices instructing her to kill her infant son
  - d. Patient who argued with her boyfriend and inflicted a superficial cut on her arm
19. -----is a selective serotonin reuptake inhibitor (SSRI) used in the treatment of depression
- a. Trimipramine
  - b. Fluoxetine
  - c. Imipramine
  - d. Amytryptilline
20. The brand name of the SSRI referred to in question 16 above is:
- a. Surmontil
  - b. Prozac
  - c. Tofranil
  - d. Norpramine
21. A client has a nursing diagnosis of insomnia related to paranoid thinking as evidenced by midnight awakenings, difficulty falling asleep, and daytime napping. Which is a correctly written and appropriate outcome for this client's problem?
- a. The client will avoid daytime napping and attend all groups.
  - b. The client will exercise, as needed, before bedtime.
  - c. The client will sleep 7 uninterrupted hours by day four of hospitalisation.
  - d. The client's sleep habits will improve during hospitalisation.
22. A 35-year-old man with bipolar disorder comes to the clinic for routine follow-up examination. His condition has been difficult to control and has required treatment with multiple medications during the past two years. The patient says his mood has been stable

with his current regimen, but for the past three months, he has had tremor primarily affecting his hands. Which of the following medications is the most likely cause of this patient's tremor?

- a. Carbamazepine
- b. Gabapentin
- c. Lamotrigine
- d. Lithium carbonate

23. A 22-year-old woman who is a college student is brought to the clinic by her roommate because she has been acting strangely during the past six months. During the past month, the patient has been describing how another person's thoughts have been entering into her mind. The patient's grades have been slipping, and she does not talk as much as she did previously. The roommate says that when the patient does talk, she strays from the topic and is hard to follow. During the interview, the patient says a television reporter told her that the government had a special message for her and she should listen to the radio for further instructions. Which of the following conditions is the most likely cause of this patient's symptoms?

- a. Acute stress disorder
- b. Delusional disorder
- c. Schizoaffective disorder
- d. Schizophrenia

24. Lithium is a drug used in the management of bipolar disorder. All of the following are not true about lithium in elderly patients, *except*:

- a. Lithium is contraindicated in elderly patients because they are at higher risk for drug tolerance
- b. Lithium is contraindicated in elderly patients because of risk of toxicity as a result comorbid diseases
- c. Lithium should be prescribed with extreme caution in elderly patients due to risk of renal insufficiency and therefore poor lithium elimination
- d. Lithium can be prescribed freely with elderly patients as they can tolerate it well

25. All of the following precautions should be used to prevent lithium toxicity, *except*:

- a. Educate patient to lithium with or after meals and to take lots of fluids, preferably water up to 2.5 to 3 litres a day.
- b. Monitoring plasma concentrations of lithium twice a week until patient stabilises and then monthly thereafter
- c. Obtain serum sample 12 hours before administration of lithium for monitoring plasma concentration levels.
- d. Start lithium with least doses allowable, and increase conservatively while monitoring for changes in mood

**[Total Marks: 25]**

## **QUESTION 2**

### **SECTION A: TRUE OR FALSE**

1. The Diagnostic Statistical Manual (DSM) is the same document as the International Classification of Diseases.
2. The DSM-5 was published in 2013, replacing the DSM-IV-TR published in 1994.
3. "SAD-CHILDREN" is a tool that can be used by mental health nurses to assess suicidality in paediatric patients.
4. In addition to managing a patient with suicidal tendencies, their family members need therapy as well as they may blame themselves.
5. Patients on lithium should be strongly advised to take lots of fluids, preferably water, to prevent dehydration as lithium causes loss of fluids.

### **SECTION B: STRUCTURED QUESTIONS**

- A. State and describe the main components of a comprehensive psychiatric history (10marks)
- B. Discuss the importance of a mental status examination in mental health nursing (5marks )
- C. Documentation is a component of the nursing process that is often missed or not done well. Discuss five reasons why documentation is important (5marks)

**[Total marks: 25]**

### QUESTION 3

Sarah is a 29 year old female brought to the outpatient department at the Mbabane hospital with a sudden onset of tachycardia, sweating, palpitations and fainting. Her medical notes indicate that she had two similar attacks the past two months. Now her colleagues fear that she might be having a “heart problem”. However an x-ray, scan and ECG reveal no abnormalities of the heart other than the rapid pulse. None of her family members have a history of mental illness.

- A. What could Sarah be suffering from? Use DSM-5 diagnostic criteria to explain your answer (6 marks)
- B. Using the following nursing diagnosis, develop a nursing management plan for Sarah: “Fear related to unpredictability of panic attacks evidenced by expression of inability to cope” (8 marks)
- C. Anxiolytics are a class of drugs used to manage anxiety disorders. However these drugs may have serious side effects if used for a long time. Discuss how you manage the following side effects of anxiolytics:
  - a. Tolerance and dependence (6 marks)
  - b. Discuss the nursing implications of Anxiolytics (5 marks)

**[Total marks: 25]**