

**UNIVERSITY OF SWAZILAND  
FACULTY OF HEALTH SCIENCES**

**SUPPLEMENTARY EXAMINATION PAPER JULY 2017**

**TITLE: MENTAL HEALTH PROBLEMS AND SOCIETY I**

**COURSE: NUR 552**

**DURATION: TWO (2) HOURS**

**MARKS: 75**

- INSTRUCTIONS:**
- 1. ANSWER ALL QUESTIONS**
  - 2. EACH QUESTION CARRIES 25 MARKS**

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**Question 1. Multiple Choice Questions.**

For each of the following questions select the most appropriate answer from the options provided. In your answer booklet write the question number and the alphabet representing your selected answer (1 mark each).

1. The following are components of mental health nursing except
  - a) Interpersonal process
  - b) Supporting and facilitating
  - c) Lifestyle changing
  - d) Aims at counseling
  
2. The most common high prevalence disorder in the community is
  - a) Schizophrenia
  - b) Anxiety
  - c) Bipolar
  - d) None of the above
  
3. Diagnostic criteria for a manic episode do not include
  - a) A catatonic state
  - b) Grandiosity and flight of ideas
  - c) Pressured speech
  - d) Decreased need for sleep
  
4. Sisimo is hyperactive, as displayed by an inability to stay in one place for long. Despite this perpetual activity, Sisimo achieves little, as he does not finish things that he starts. Invariably Sisimo is first up in the morning but last to breakfast. This behaviour describes a:
  - a) Manic client
  - b) Psychotic client
  - c) Anxious client
  - d) Depressed client
  
5. A personality disorder is not likely to be seen in the following pattern
  - a) Cognition
  - b) Dressing and grooming
  - c) Interpersonal functioning
  - d) Impulse control
  
6. In the DSM 5, a medical condition that gives rise to a mental disorder is recorded as
  - a) A specifier
  - b) A diagnostic subtype
  - c) A provisional diagnosis
  - d) A principal diagnosis
  
7. In which situation would benzodiazepines be prescribed appropriately
  - a) Long-term treatment of post-traumatic stress disorder, convulsive disorder and alcohol withdrawal

- b) Long term treatment of panic disorder, alcohol dependence and bipolar affective disorder
- c) Short-term treatment of generalised anxiety disorder, alcohol withdrawal and preoperative sedation
- d) Short-term treatment of obsessive-compulsive disorder, skeletal muscle spasms and essential hypertension

8. Based on the nurse's knowledge of DSM 5 it is understood that the presence of psychotic symptoms for a period less than a month but at least one day is a characteristic of

- a) Schizoaffective disorder
- b) Brief psychotic disorder
- c) Schizophrenic spectrum disorder
- d) Schizophreniform disorder

9. For the past year a client has received haloperidol. The nurse administering the client's next dose notes a twitch on the right side of the client's face and tongue movements. Which nursing intervention takes priority?

- a) Administer haloperidol along with benztropine 1 mg PRN per order
- b) Assess for other signs of hyperglycemia resulting from use of haloperidol
- c) Check the client's temperature and assess mental status
- d) Withhold the haloperidol and call the physician

10. A client is exhibiting sedation, auditory hallucinations, dystonia and grandiosity. The client is prescribed haloperidol 5 mg. twice daily and trihexyphenidyl 2mg daily. Which statement about these medications is accurate?

- a) Trihexyphenidyl would assist the client with sedation
- b) Trihexyphenidyl would assist the client with auditory hallucinations
- c) Haloperidol would assist the client to decrease grandiosity
- d) Haloperidol would assist the client with dystonia

11. A client is newly prescribed lithium carbonate. Which teaching point by the nurse takes priority?

- a) Get yourself in a daily routine to assist avoiding relapse
- b) Limit your fluid intake to 2000 mL/day
- c) Monitor your caloric intake because of potential weight gain
- d) Make sure your salt intake is consistent

12. Clients diagnosed with obsessive-compulsive disorder commonly use this defense mechanism

- a) Suppression
- b) Repression
- c) Denial
- d) Undoing

13. According to the DSM 5 which diagnostic criterion would not describe schizotypal personality disorder?

- a) Exhibits behavior or appearance that is odd, eccentric or peculiar

- b) Considers relationships to be more intimate than they actually are
- c) Is preoccupied with unjustified doubts about the loyalty or trustworthiness of friends or associates
- d) Neither desires nor desires close relationships, including being part of a family

14. When assessing a client diagnosed with histrionic personality disorder, the nurse might identify which characteristic behavior?

- a) Odd beliefs and magical thinking
- b) Attention-seeking flamboyance
- c) Grandiose sense of self importance
- d) Preoccupation with orderliness and perfection

15. A client diagnosed with Bipolar mood disorder has been taking lithium carbonate for 3 months. Which assessment data would make the nurse request a lithium level?

- a) Blurred vision and vomiting
- b) Increased thirst and urination
- c) Drowsiness and dizziness
- d) Hypotension and arrhythmias

16. A client with which personality disorder characteristically chooses solitary activities, seems indifferent to praise and criticism, and has deficits in the ability to form personal relationships or respond to others in a meaningful way?

- a) Schizotypal
- b) Schizoid
- c) Paranoid
- d) Histrionic

17. A client with a long history of alcoholism recently has been diagnosed with Wernicke-Korsakoff syndrome. Which symptoms should the nurse expect to assess?

- a) A sudden onset of muscle pain with elevation of creatinine phosphokinase
- b) Signs and symptoms of congestive heart failure
- c) Loss of short-term and long-term memory and the use of confabulation
- d) Inflammation of the stomach and gastro-oesophageal reflux disorder

18. While performing an admission interview, the nurse learns that the client drinks to avoid early morning "shakes". The nurse recognizes this behavior as

- a) Substance use
- b) Substance intoxication
- c) Substance dependence
- d) Delirium tremens

19. A client with a short history of heavy drinking is seen in the emergency department. The client has a pulse rate of 120 beats/min, respirations of 24/min and a blood pressure of 180/90 mm Hg, and is

- diaphoretic and tremulous. The client is confused and picks at extremities. What would be the suspected cause of the symptoms?
- Wernicke-Korsakoff syndrome
  - Alcoholic amnestic disorder
  - Alcohol withdrawal delirium
  - Acute alcoholic myopathy
20. Penetration with a penis, begun with consent, becomes rape in which of the following circumstances?
- When a man exceeds a reasonable time for negotiating the continuance of intercourse with the woman
  - When a man completes intercourse.
  - If the woman ceases to consent.
  - When a man, upon realizing that the woman no longer consents, does not immediately withdraw his penis completely from the woman.
21. A speech disorder characterised by pathologic repetition of words said by another is
- Echopraxia
  - Echolalia
  - Circumstantiality
  - Looseness of association
22. Clinical symptoms likely to be present in a client with a phobic disorder include
- Persistent obsessive thoughts
  - Re-experience of feelings associated with traumatic events
  - Fear and avoidance of specific situations or places
  - Unrealistic worry about a number of events in one's life
23. The phase in the debriefing process that focuses on how a person responds to traumatic experience is
- Symptom phase
  - Reaction phase
  - Thought stage
  - Preparatory and re-entry phase
24. The following are recognised side effects of tricyclic antidepressants **except**
- Antimuscarinic side-effects (dry mouth, hesitancy of micturition, constipation).
  - Arrhythmias
  - Insomnia
  - Sweating
25. A client diagnosed with a panic attack has a nursing diagnosis of social isolation related to fear. Using a cognitive approach, which nursing intervention is appropriate?

- a) Discuss with the client the situation before the occurrence of a panic attack
- b) Encourage the client to acknowledge two trusted individuals who can assist the client during a panic attack
- c) Remind the client to use a journal to express feelings surrounding the panic attack
- d) During a panic attack, remind the client to say "I know this attack will last only for a few minutes"

**TOTAL = 25**

### Question 2

Conducting a mental status assessment is one of the essential skills that a psychiatric-mental health should master. In the table below, match each of the statements that describe a nurse's findings in a mental status assessment with the relevant area of assessment. In your answer sheet write the question number and the alphabet (in uppercase) representing the answer you have selected (25 Marks).

<b>Finding</b>	<b>Area of Assessment</b>
1. Aware of time, place, person, knows length of stay in hospital, is not aware of where he is.	A. Sensitivity
2. Hallucinations and illusions.	B. Speech
3. False belief of one's importance, power and identity, false belief that one is being cheated or harassed.	C. Attention
4. Unrealistic, irrational fears.	D. Mood
5. Amnesia, fugue, confabulation.	E. Affect
6. Subnormal, average, above average intellectual capacity.	F. Phobic thoughts
7. Patient's ability to identify existence of a problem.	G. Insomnia
8. Normal in rate, tone or volume or fast, pressured and loud.	H. Homicidal ideation
9. The main reason a patient is seeking mental health examination.	I. Memory
10. What a client would do in a social situation such as "what would you do if you found a stamped addressed envelope on the street.	J. Attitude
11. Desire to do serious harm or take the life of another person.	K. Delusion
12. Desire to end one's life.	L. Thought content
13. Awkward posture or position for prolonged period.	M. Appearance
14. Wears excessive makeup, bright colours, overweight.	N. Perception
15. Happy, sad, expressionless, appropriate to the situation.	O. Echolalia
16. Feeling of unworthiness, helplessness, guilt or obsessions.	P. Echopraxia
17. Easily hurt or damaged, susceptible.	Q. Behaviour and psychomotor activity
18. Excessive imitation of another person's behaviours	R. Catatonia
19. Repetition of one person's words by another.	S. Chief complaint
20. Hyperactivity, agitation or poverty of movement	T. Suicidal ideation
21. Diminished amount of sleep, early morning awakening	U. Intelligence
22. Able to explain "no use crying over spilt milk"	V. Judgement
23. Labile, blunted, ambivalence	W. Orientation
24. Difficulty finishing tasks, easily distracted, having difficulty concentrating	X. Insight
25. Hostile, evasive, defensive	Y. Abstract thought

**TOTAL = 25**

**Question 3**

- a) Senzo, a 19-year old male, attended a party where a lot of alcohol was served. He got too drunk and the next day he found himself in a house with a strange man. His anus felt sore and he noticed that he was slightly bleeding. After dressing up he thought of going to the police station to report that he had been sexually assaulted but then decided against it. He was also hesitant to seek medical care.

Describe the possible impact of the sexual assault (rape) on Senzo. (10)

- b) Marital rape is not a criminal offence in Swaziland.

(i) What is the basis for this state of affairs? (3)

(ii) What are the likely impacts on the woman of marital rape? (12)

**TOTAL = 25**