

College Admission PMHNP Dumps Questions | Reliable PMHNP Test Sims

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PMHNP Comprehensive Exam with complete solution (This test consists of frequently tested questions and answers)

AIMS - answers>>>Abnormal Involuntary Movement Scale for 8 and older
12 item tool to assess symptoms of tardive dyskinesia for patients taking antipsychotics
Rating 0-4, >2 to diagnose TD and reduce dose

BARS - answers>>>Barnes Akathisia Rating Scale for 8 and older
4 item tool to assess objective and subjective symptoms of akathisia with antipsychotics and/or SSRIs

CRS-R - answers>>>Conners Rating Scales - Revised for 3-17
ADHD Parent (80 items) and Teacher Scales (59 items)
Low T-score of 61= mildly atypical; >70 = markedly atypical
Subscales for Oppositional Behaviors, Cognitive Problems, Hyperactivity, ADHD Index, Anxious-Shy, Perfectionism, Social Problems, DSM-IV Subscales and Connors' Global Index

Vanderbilt ADHD Parent and Teacher - answers>>>55 parent, 43 teacher items for 6-12
Initial assessment rates symptoms and impairment in academic and behavioral performance

ASRS-1 - answers>>>Adult ADHD Self-Report Scale, 16 and older
Two-part Screening
Part A: 6 questions, 4 symptoms suggest ADHD
Part B: 12 questions to clarify and quantify

AUDIT-C - answers>>>Alcohol Use Disorders Identification Test - Consumption, > 13
Documents use and frequency in prior year
0-4, F >3 = positive, M >4 = positive, >8 = hazardous drinking

CAGE-AID - answers>>>IDs problem drinking or druging, 13 and older
(C=cut down, A=annoy, G=guilty, E=Eye-opener, AID=altered to include drugs)

CRAFFT - answers>>>6-item screen for alcohol or drugs in adolescents, 14-18
(C=car, R=relax, A=alone, F=forget, F=family or friends, T=trouble)

BAI - answers>>>Beck Anxiety Inventory, 17 and older
Assesses 21 symptoms of anxiety, 0-36 scores

HAM-A - answers>>>Hamilton Anxiety Scale, most commonly used
14 domains, 14=mild, 18-24= moderate, 25-30=severe

LSAS-CA - answers>>>Liebowitz Social Anxiety Scale-Child/Adolescent Version, 7 and older
24 items, social and performance

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College Admission American Nurses Credentialing Center: Adult Psychiatric-Mental Health Nurse Practitioner-Board Certified Sample Questions (Q418-Q423):

NEW QUESTION # 418

A patient who has been smoking for the past 10 years expresses a desire to quit. According to the transtheoretical model of change, in which of the following stages is the patient?

- A. Preparation
- B. Contemplation
- C. Precontemplation
- D. Action

Answer: B

Explanation:

The transtheoretical model of change describes the process of behavior change. The model identifies five stages of change: precontemplation, contemplation, preparation, action, and maintenance.

In the precontemplation stage, individuals are not yet considering changing their behavior. In the contemplation stage, individuals are aware of the need to change and are actively considering their options. In the preparation stage, individuals have decided to change and are preparing to take action. In the action stage, individuals are actively engaged in changing their behavior; in the maintenance stage, individuals are working to maintain the behavior change over time.

NEW QUESTION # 419

During a mental status exam, which of the following findings would suggest hypomania?

- A. Slow, slurred speech and decreased eye contact
- B. Increased psychomotor activity and decreased sleep
- C. Withdrawal from social interaction and decreased energy level
- D. Flat affect and poor grooming

Answer: B

Explanation:

Hypomania is a milder form of mania characterized by symptoms such as increased energy, euphoria, decreased need for sleep, increased talkativeness, and increased psychomotor activity. Grandiosity, or an inflated sense of self-esteem, is also a common symptom of hypomania. During a mental status exam, a healthcare provider would be looking for signs of hypomania, such as rapid speech, increased energy level, and grandiose delusions.

Slow, slurred speech and decreased eye contact are more indicative of depression or sedation. Flat affect and poor grooming are signs of a blunted emotional response and poor self-care, which are more characteristic of depression or schizophrenia. Withdrawal from social interaction and decreased energy levels are also more characteristic of depression.

NEW QUESTION # 420

According to Sullivan's stages of interpersonal development, which stage is characterized by a focus on self-actualization and the development of satisfying relationships with others?

- A. Pre-adolescence
- B. Juvenile
- C. Late adolescence
- D. Infancy

Answer: C

Explanation:

Sullivan's stages of interpersonal development outline a series of stages that individuals go through as they develop interpersonal relationships. Late adolescence is the final stage in Sullivan's model, and it is characterized by a focus on self-actualization and the development of satisfying relationships with others. This stage is marked by an increased sense of autonomy and a desire for intimacy and emotional connection with others.

Infancy, juvenile, and pre-adolescence are all earlier stages in Sullivan's model that are marked by different developmental goals and challenges. Infancy is characterized by the development of a sense of trust and the establishment of basic interpersonal skills, while juvenile and pre-adolescence are marked by the development of peer relationships and social skills.

NEW QUESTION # 421

What term best describes the process of neuronal membrane threshold sensitivity dysfunction?

- A. Dependence
- B. GABA deregulation
- C. Increased noradrenergic activity
- D. Kindling

Answer: D

Explanation:

Kindling is the process of neuronal membrane threshold sensitivity dysfunction.

GABA deregulation and increased noradrenergic activity can play a role in the dysfunction of neuronal membrane threshold sensitivity but are not the terms that best describe the phenomenon. Dependence is caused by neuronal membrane threshold sensitivity changes but does not best describe the phenomenon.

NEW QUESTION # 422

A PMHNP often uses an integrated approach to treating mental health disorders instead of a purely pharmacological approach. These nonpharmacologic options can include group therapy, family therapy, and alternative treatments such as meditation. Drug therapy does not address interpersonal and life stressors.

Which group of diagnoses particularly benefits from and is frequently prescribed nonpharmacologic therapy in addition to medication?

- A. Autism spectrum disorder
- B. Narcissistic and borderline personality disorders
- C. Frontal-temporal lobe dementia
- D. Schizophrenia

Answer: B

Explanation:

Patients with narcissistic and borderline personality disorders are often prescribed dialectical behavioral therapy (DBT). The goal is to help the patient learn self-regulation with emotions and increase stress tolerance. Medication by itself does not allow someone to develop insight into the problem. DBT also stresses self-management, mindfulness, and interpersonal skills.

NEW QUESTION # 423

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