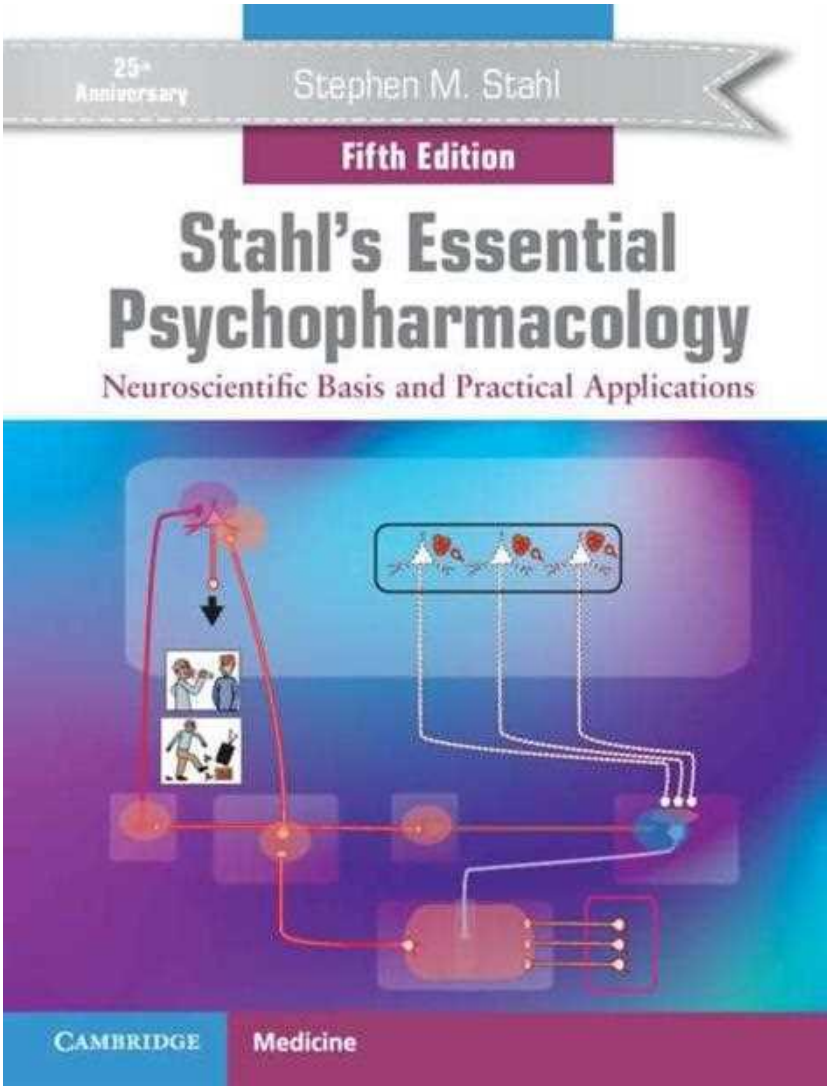
# TEST BANK

## Stahl's Essential Psychopharmacology

### Neuroscientific Basis and Practical Applications

## Stephen M. Stahl

**5th Edition**



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## Chapter 1: Chemical neurotransmission

### Multiple Choice

1. A patient with depression mentions to the nurse, My mother says depression is a chemical disorder. What does she mean? The nurses response is based on the theory that depression primarily involves which of the following neurotransmitters?

a. Cortisol and GABA
b. COMT and glutamate
c. Monamine and glycine
d. Serotonin and norepinephrine

ANS: D
One possible cause of depression is thought to involve one or more neurotransmitters. Serotonin and norepinephrine have been found to be important in the regulation of depression. There is no research to support that the other options play a significant role in the development of depression.

2. A patient has experienced a stroke (cerebral vascular accident) that has resulted in damage to the Broca area. Which evaluation does the nurse conduct to reinforce this diagnosis?

a. Observing the patient pick up a spoon
b. Asking the patient to recite the alphabet
c. Monitoring the patients blood pressure
d. Comparing the patients grip strength in both hands

ANS: B
Accidents or strokes that damage Brocas area may result in the inability to speak (i.e., motor aphasia). Fine motor skills, blood pressure control, and muscle strength are not controlled by the Broca area of the left frontal lobe.

3. The patient diagnosed with schizophrenia asks why psychotropic medications are always prescribed by the doctor. The nurses answer will be based on information that the therapeutic action of psychotropic drugs is the result of their effect on:

a. The temporal lobe; especially Wernickes area
b. Dendrites and their ability to transmit electrical impulses
c. The regulation of neurotransmitters especially dopamine
d. The peripheral nervous system sensitivity to the psychotropic medications

along with symptoms of schizophrenia. Paranoid schizophrenia is characterized by persecutory or grandiose delusions.

8. A patient tried to gouge out his eye in response to auditory hallucinations commanding, If thine eye offends thee, pluck it out. The nurse would analyze this behavior as indicating:

a. Derealization

b. Inappropriate affect

c. Impaired impulse control

d. Inability to manage anger

ANS: C

Command hallucinations may be so intense that the patient cannot control the impulse to do what the hallucination tells him to do; thus the patient has impaired impulse control. This is not an anger management problem. Derealization is a feeling that the environment is distorted or unreal and not suggested in the scenario. No evidence of inappropriate affect is given.

9. An appropriate intervention for a patient with an identified nursing diagnosis of situational low self-esteem would be:

a. Providing large muscle activities to relieve stress

b. Attempting to determine triggers to hallucinations

c. Engaging patient in activities designed to permit success

d. Encouraging verbalization of feelings in a safe environment

ANS: C

All are useful interventions for a patient with schizophrenia; however, engaging the patient in specifically designed activities is the only option that addresses improving self-esteem.

10. A 19-year-old patient is admitted for the second time in 9 months and is acutely psychotic with a diagnosis of undifferentiated schizophrenia. The patient sits alone rubbing her arms and smiling. She tells the nurse her thoughts cause earthquakes and that the world is burning. The nurse assesses the primary deficit associated with the patients condition as:

a. Social isolation

b. Disturbed thinking

c. Altered mood states

d. Poor impulse control

ANS: B

*15.* Which sign(s) and symptom(s) may occur in neuroleptic malignant syndrome? *(Select all that apply.)*

a. Fever
b. Hypertension
c. Severe extrapyramidal symptoms
d. Alterations in consciousness
e. Bradycardia

ANS: A, B, C, D
Fever, severe extrapyramidal symptoms, hypertension, and alterations in consciousness (such as stupor, mutism, and coma) are characteristic of neuroleptic malignant syndrome. Bradycardia is not a sign of neuroleptic malignant syndrome.

*16.* Which adverse effect(s) may occur as a result of antipsychotic drug therapy? *(Select all that apply.)*

a. Acute dystonia
b. Akathisia
c. Weight loss
d. Neuroleptic malignant syndrome
e. Hypoglycemia
f. Tardive dyskinesia

ANS: A, B, D, F
Antipsychotic drugs can cause neuroleptic malignant syndrome and motor dysfunctions such as dystonia, akathisia, and tardive dyskinesia. Antipsychotic drugs may cause weight gain and hyperglycemia.

17. A patient admitted to a psychiatric facility is hallucinating, pacing, and acting highly suspicious. Based on this information, the nurse will take which action(s)? *(Select all that apply.)*

a. Use the most restrictive restraints available to subdue the patient.
b. Be open and direct when handling the patient.
c. Encourage a variety of interactions with others.
d. Provide high-protein, high-calorie foods.
e. Reinforce hallucinations.

ANS: B, D
Nursing interventions for patients with psychosis must be individualized and based on patient assessment data. The nurse should be open and direct when handling patients who are highly suspicious. High-protein, high-calorie foods are appropriate for the individual to eat while pacing or highly active. If physical restraints are necessary,