

**Chapter 01: Med, Meds, Milieu**  
**Keltner: Psychiatric Nursing, 8th Edition**

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**MULTIPLE CHOICE**

1. A newly licensed asks a nursing recruiter for a description of nursing practice in the psychiatric setting. What is the nurse recruiter's best response?
  - a. "The nurse primarily serves in a supportive role to members of the health care delivery team."
  - b. "The multidisciplinary approach eliminates the need to clearly define the responsibilities of nursing in such a setting."
  - c. "Nursing actions are identified by the institution that distinguishes nursing from other mental health professions."
  - d. "Nursing offers unique contributions to the psychotherapeutic management of psychiatric patients."

ANS: D

Professional role overlap cannot be denied; however, nursing is unique in its focus on and application of psychotherapeutic management. Neither the facility nor the multidisciplinary team define the professional responsibilities of its members but rather utilizes their unique skills to provide holistic care. Ideally, all team members support each other and have functions within the team.

DIF: Cognitive level: Analyzing TOP: Nursing process: Implementation  
MSC: Client Needs: Safe, Effective Care Environment

2. Which component of the nursing process will the nurse focus upon to address the responsibility to match individual patient needs with appropriate services?
  - a. Planning
  - b. Evaluation
  - c. Assessment
  - d. Implementation

ANS: C

Proper assessment is critical for being able to determine the appropriate level of services that will provide optimal care while considering patient input and at the lowest cost. Planning and implementation utilizes the assessment data to identify and execute actions (treatment plan) that will provide appropriate care. Evaluation validates the effectiveness of the treatment plan.

DIF: Cognitive level: Applying TOP: Nursing process: Assessment  
MSC: Client Needs: Safe, Effective Care Environment

3. An adult diagnosed with paranoid schizophrenia frequent experiences auditory hallucinations and walks about the unit, muttering. Which nursing action demonstrates the nurse's understanding of effective psychotherapeutic management of this client?
  - a. Discussing the disease process of schizophrenia with the client and their domestic partner
  - b. Minimizing contact between this patient and other patients to assure a stress free milieu
  - c. Administering PRN medication when first observing the evidence that the client

- may be hallucinating
- d. Independently determining that behavior modification is appropriate to decrease the client's paranoid thoughts

ANS: A

An understanding of psychopathology is the foundation on which the three components of psychotherapeutic management rest; it facilitates therapeutic communication and provides a basis for understanding psychopharmacology and milieu management. Minimizing contact between the patient and others and administering PRN medication indiscriminately are nontherapeutic interventions. Using behavior modification to decrease the frequency of hallucinations would need to be incorporated into the plan of care by the care team.

DIF: Cognitive level: Applying TOP: Nursing process: Implementation  
MSC: Client Needs: Safe, Effective Care Environment

4. An adult diagnosed with chronic depression is hospitalized after a suicide attempt. Which intervention is critical in assuring long-term, effective client care as described by psychotherapeutic management?
  - a. Involvement in group therapies
  - b. Focus of close supervision by the unit staff
  - c. Maintaining effective communication with support system
  - d. Frequently scheduled one-on-one time with nursing staff

ANS: D

A critical element of psychotherapeutic management is the presence of a therapeutic nurse-patient relationship. One-on-one time with nursing staff will help in establishing this connection. While the other options are appropriate and client centered, the nurse-client relation is critical in the long-term effective care to this client.

DIF: Cognitive level: Applying TOP: Nursing process: Implementation  
MSC: Client Needs: Psychosocial Integrity

5. A patient's haloperidol dosage was reduced 2 weeks ago to decrease side effects. What assessment question demonstrates the nurse's understanding of the resulting needs of the client?
  - a. "Will you have any difficulty getting your prescription refilled?"
  - b. "Have you begun experiencing any forms of hallucinations?"
  - c. "What do you expect will occur since the dosage has been reduced?"
  - d. "What can I do to help you manage this reduction in haloperidol therapy?"

ANS: B

It will be necessary for the nurse to assess for exacerbation of the patient's symptoms of psychosis as well as for a lessening of side effects. Dosage decrease might lead to the return or worsening of positive symptoms such as hallucinations and delusions, and negative symptoms such as blunted affect, social withdrawal, and poor grooming. While the other options may be appropriate assessment questions, they are not directed at the current needs of the client; the identification of emerging psychotic behaviors.

DIF: Cognitive level: Analyzing TOP: Nursing process: Assessment  
MSC: Client Needs: Physiologic Integrity

6. Which statement forms the foundation upon which a nurse should base the implementation of psychotherapeutic management to the care of a patient with mental illness?
- The nurse's role in client care is supported by the multidisciplinary team.
  - Omitting any one component will compromise the effectiveness of the treatment.
  - The most important element of psychotherapeutic management is drug therapy.
  - A therapeutic nurse-patient relationship is the most important aspect of treatment.

ANS: B

When one element is missing, treatment is usually compromised. No single element is more important than the others; however, patients' needs govern the application of the components and permit judicious use. The remaining options identify components of the psychotherapeutic management process.

DIF: Cognitive level: Analyzing TOP: Nursing process: Analysis  
MSC: Client Needs: Safe, Effective Care Environment

7. Which statement most accurately describes a nurse's role regarding psychopharmacology?
- "You will need to frequently make decisions regarding the administration of PRN medications to help the client manage anger."
  - "It's a nursing responsibility to adjust a medication dose to assure effective patient responses."
  - "Nurses administers medications while evaluating drug effectiveness is a medical responsibility."
  - "To best assure appropriate response, a patient's questions about drug therapy should be referred to the psychiatrist."

ANS: A

Nursing assessment and analysis of data might suggest the need for PRN medication as patient anxiety increases or psychotic symptoms become more acute. The nurse is the health team member who makes this determination. Nurses are responsible for monitoring drug effectiveness as well as administering medication. Nurses should assume responsibility for teaching patients about the side effects of medications. Nurses cannot alter prescribed dosages of medications unless they have prescriptive privileges.

DIF: Cognitive level: Analyzing TOP: Nursing process: Analysis  
MSC: Client Needs: Safe, Effective Care Environment

8. When considering environmental aspects of milieu management, which intervention has the highest priority for a client admitted after a failed suicide attempt?
- Sending the client's new medication prescriptions to the pharmacy
  - Assigning a staff member to one-on-one observation of the client
  - Orienting the client to the milieu's public and private spaces
  - Having all potentially dangerous items removed from the client's belongings

ANS: B

Milieu management provides a proactive approach to care. Safety overrides all other dimensions of the milieu. Initiation of suicide precautions are the priority for this client. All the remaining options are appropriate but none protect the client from the risk of another attempt to self-harm as effectively as one-on-one observation as part of suicide precautions.

DIF: Cognitive level: Analyzing TOP: Nursing process: Implementation