

Cheap Nursing CEUs

Mental Health in the Pediatric Population

1. Which of the following statements best explains the significance of recognizing pediatric mental health disorders?

- A. Recognizing these disorders helps in providing accurate diagnoses and appropriate treatments.
 - B. Recognition allows for better academic performance in children.
 - C. Early recognition only benefits nurses in their career progression.
 - D. Recognition primarily reduces the anxiety levels of caregivers.
-

2. What is a common factor between Generalized Anxiety Disorder (GAD) and Separation Anxiety Disorder in children?

- A. Both disorders are more prevalent in male children.
 - B. They both involve excessive, irrational fear that affects daily activities.
 - C. The symptoms of both disorders usually subside before adolescence.
 - D. Both are primarily caused by environmental factors like school events.
-

3. When devising nursing interventions for children with pediatric mood disorders, what key consideration should a nurse prioritize?

- A. Focusing solely on the child's physical symptoms of mood disorder.
 - B. Ensuring that family members are educated on the disorder without involving them in treatment.
 - C. Promoting optimal health by integrating mental health considerations into the child's care plan.
 - D. Isolating the child to prevent interaction with peers during treatment.
-

4. Which treatment approach is most appropriate for managing selective mutism in children?

- A. Developing speech therapy programs that focus on correcting speech impairments.
 - B. Designing parent-child interaction therapies to decrease anxiety without pressuring verbal responses.
 - C. Encouraging verbal interaction through mandatory participation in public speaking events.
 - D. Increasing pharmacological interventions to reduce overall anxiety symptoms.
-

5. What is a primary difference between Conduct Disorder and Oppositional Defiant Disorder in pediatric patients?

- A. Conduct Disorder involves severe aggression and violation of others' rights, while ODD is characterized by defiant behavior with less aggression.
 - B. ODD leads to legal consequences more frequently than Conduct Disorder.
 - C. Both disorders have identical symptoms but differ in ages of onset.
 - D. Conduct Disorder occurs only in adolescents, whereas ODD occurs in younger children.
-

6. Which of the following best describes the 'combined type' of ADHD symptoms?

- A. Symptoms are exclusively inattentiveness-related.
 - B. Symptoms are exclusively hyperactivity-related.
 - C. Symptoms combine both inattentive and hyperactivity-impulsivity characteristics.
 - D. Symptoms alternate between inattentive and hyperactivity over time.
-

7. What distinguishes atypical anorexia nervosa from typical anorexia nervosa?

- A. Atypical anorexia nervosa involves binge eating, whereas typical does not.
 - B. Atypical anorexia patients maintain a typical weight despite similar psychological symptoms.
 - C. Atypical anorexia nervosa focuses on muscle gain instead of weight loss.
 - D. Atypical anorexia nervosa patients do not experience distressing thoughts about food.
-

8. In the context of childhood PTSD, which factor is most likely to worsen the condition?

- A. The trauma was a natural disaster.
 - B. The trauma was experienced by the child's peers.
 - C. The trauma was intentional like abuse.
 - D. The trauma involved a minor accident.
-

9. What is a critical reason for employing screening tools like the PSC-17 in pediatric care?

- A. To provide a quick and definitive diagnosis for ADHD.
 - B. To detect mental health issues that may not be apparent through observation.
 - C. To solely evaluate the intelligence level of a child.
 - D. To recommend immediate psychiatric medication.
-

10. Why is there no single cause identified for pediatric mental health disorders?

- A. Because mental health disorders are solely caused by genetics.
 - B. Due to competition among various behavioral health research centers.
 - C. Because mental health disorders arise from a mix of genetic, biological, and environmental factors.
 - D. Because mental health disorders are exclusively caused by environmental factors like social media.
-

11. What factors can affect the accuracy and efficiency of using pediatric mental health screening tools in a primary care setting?

- A. The time constraints of office staff and compatibility with patient age groups
 - B. The specific mental health disorder being diagnosed and simultaneous use of multiple screening tools
 - C. Clinic's geographic location and patient's socioeconomic status
 - D. The provider's level of experience and patient's familiarity with mental health assessments
-

12. Why is cognitive behavioral therapy (CBT) often combined with medications in treating anxiety disorders in children?

- A. CBT alone leads to quicker symptom resolution than medications alone
 - B. Medications alone are more effective than introducing CBT
 - C. Studies show a combination of CBT and medications is more effective than using either modality independently
 - D. CBT is quicker to implement than medication regimens
-

13. Which of the following statements is accurate regarding oppositional defiant disorder (ODD) treatment?

- A. Medication is typically the first step in treating ODD symptoms
 - B. Parent management training focuses primarily on non-consistent outcomes
 - C. Differential attention involves rewarding desired behavior and building rapport
 - D. Family therapy is optional but not essential for treating ODD
-

14. Regarding treatment of post-traumatic stress disorder in children, how does it differ from that in adults?

- A. Medication is the primary treatment option for children but not adults
 - B. Exposure-based therapy is used in all cases for both children and adults
 - C. Trauma-focused psychotherapy is more effective than medication treatment alone in children
 - D. Children require hospitalization more often than adults when diagnosed with PTSD
-

15. Why is continual communication essential when introducing medication treatment for ADHD in a child?

- A. It prevents the child from developing tolerance to the medication
 - B. The medication combinations work differently for various individuals requiring ongoing evaluation
 - C. It is necessary to adjust the child's dosage weekly to avoid side effects
 - D. It ensures that the school can apply behavior interventions consistently
-

16. What should be Debbie's primary focus when Emily arrives at the behavioral health unit?

- A. Observing how Emily's arrival affects the milieu environment.
 - B. Ensuring Emily immediately interacts with other patients.
 - C. Providing Emily with a comprehensive list of unit rules.
 - D. Immediately starting Emily on an activity schedule.
-

17. Which factor is NOT commonly affected by pediatric mental health disorders?

- A. Physical health aspects like diet and exercise
 - B. A child's ability to learn coping skills
 - C. The risk of developing chronic diseases
 - D. Immediate improvement in academic performance
-

18. How do nursing interventions differ between pediatric ADHD and depression?

- A. ADHD interventions focus on self-management, while depression interventions involve safety planning.
 - B. ADHD interventions emphasize routines and organization, while depression interventions require understanding medication regimens.
 - C. ADHD interventions are community-based, whereas depression requires inpatient care.
 - D. ADHD interventions require increased physical activity, while depression interventions avoid structured activities.
-

19. Why is early diagnosis and treatment crucial for pediatric mental health conditions?

- A. They guarantee complete eradication of the mental health disorder.
 - B. They prevent the development of any physical health conditions.
 - C. They minimize the impact on learning, social skills, and emotional development.
 - D. They lead to immediate social integration for the child.
-

20. Which role is NOT typical for pediatric mental health nurses in a primary care setting?

- A. Promoting mental health literacy in patients and caregivers.
 - B. Providing detailed pharmacological therapies directly.
 - C. Identifying symptoms that require further evaluation.
 - D. Ensuring the awareness of mental and physical symptom connections.
-