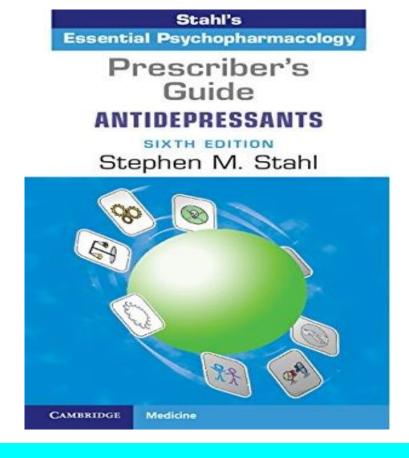
TEST BANK

Prescriber's Guide –

Stahl's Essential Psychopharmacology 6th Edition Test Bank



TEST BANK

Prescriber's Guide- Stahl's Essential Psychopharmacology 6th Edition Test Bank

Table of Content

| 1. acamprosate; |
|-----------------------|
| 2. agomelatine; |
| 3. alprazolam; |
| 4. amisulpride; |
| 5. amitriptyline; |
| 6. amoxapine; |
| 7. amphetamin (d); |
| 8. amphetamine (d,l); |
| 9. aripiprazole; |
| 10. armodafinil; |
| 11. asenapine; |
| 12. atomoxetine; |
| 13. benztropine; |
| 14. blonanserin; |
| 15. bremelanotide; |
| 16. brexanolone; |
| |
| 17. brexpiprazole; |
| 18. buprenorphine; |
| 19. bupropion; |
| 20. buspirone; |
| 21. caprylidene; |
| 22. carbamazepine; |
| 23. cariprazine; |
| 24. chlordiazepoxide; |
| 25. chlorpromazine; |
| 26. citalopram; |
| 27. clomipramine; |
| 28. clonazepam; |
| 29. clonidine; |
| 30. clorazepate; |
| 31. clozapine; |
| 32. cyamemazine; |
| 33. desipramine; |
| 34. desvenlafaxine; |
| 35. deutetrabenazine; |
| 36. dextromethorphan; |
| 37. diazepam; |
| 38. diphenhydramine; |
| 39. disulfiram; |
| 40. donepezil; |
| 41. dothiepin; |
| 42. doxepin; |
| 43. duloxetine; |
| 44. escitalopram; |
| 45. esketamine; |
| 46. estazolam; |
| 47. eszopiclone; |
| 48. flibanserin; |
| |
| 49. flumazenil; |
| 50. flunitrazepam; |
| 51. fluoxetine; |
| 52. flupenthixol; |
| 53. fluphenazine; |
| 54. flurazepam; |
| 55. fluvoxamine; |
| |

| 56. gabapentin; |
|---|
| 57. galantamine; |
| 58. guanfacine; |
| 59. haloperidol; |
| 60. hydroxyzine; |
| 61. iloperidone; |
| 62. imipramine; |
| 63. isocarboxazid; |
| 64. ketamine; |
| 65. lamotrigine; |
| 66. levetiracetam; |
| 67. lemborexant; |
| 68. levomilnacipran; |
| 69. lisdexamfetamine; |
| 70. lithium; |
| 71. lofexidine; |
| 72. lofepramine; |
| 73. loflazeptate; |
| 74. lorazepam; |
| 75. loxapine; |
| 76. lumateperone; |
| 77. lurasidone; |
| 78. maprotiline; |
| 79. memantine; |
| 80. methylfolate (l); |
| 81. methylphenidate (d); |
| 82. methylphenidate (d,l);83. mianserin; |
| 83. mianserin; |
| 84. midazolam; |
| 85. milnacipran; |
| 86. mirtazapine; |
| 87. moclobemide; |
| 88. modafinil; |
| 89. molindone; |
| 90. nalmefene; |
| 91. naltrexone; |
| 92. naltrexone-bupropion; |
| 93. nefazodone; |
| 94. nortriptyline; |
| 95. olanzapine; |
| 96. oxazepam; |
| 97. oxcarbazepine; |
| 98. paliperidone; |
| 99. paroxetine; |
| 100. perospirone; |
| 101. perphenazine; |
| 102. phenelzine; |
| 103. phentermine-topiramate; |
| 104. pimavanserin; |
| 105. pimozide; |
| 106. pipothiazine; |
| 107. pitolisant; |
| 108. prazosin; |
| 109. pregabalin; |
| 110. propranolol; |
| |

| 111 motintuling |
|--|
| 111. protriptyline; |
| 112. quazepam; |
| 113. quetiapine; |
| 114. ramelteon; |
| 115. reboxetine; |
| 116. risperidone; |
| 117. rivastigmine; |
| 118. selegiline; |
| 119. sertindole; |
| 120. sertraline; |
| 121. sildenafil; |
| 122. sodium oxybate; |
| 123. solriamfetol; |
| 124. sulpiride; |
| 125. suvorexant; |
| 126. tasimelteon; |
| 127. temazepam; |
| 128. thioridazine; |
| 129. thiothixene; |
| 130. tiagabine; |
| 131. tianeptine; |
| 132. topiramate; |
| 133. tranylcypromine; |
| 134. trazodone; |
| 135. triazolam; |
| 136. trifluoperazine; |
| 137. trihexyphenidyl; |
| 138. triiodothyronine; |
| 139. trimipramine; |
| 140. valbenazine; |
| 141. valproate; |
| 142. varenicline: |
| 142. varenicline; 143. venlafaxine; |
| 144. vilazodone; |
| 145. vortioxetine; |
| 146. zaleplon: |
| 146. zaleplon; 147. ziprasidone; |
| 148. zolpidem; |
| 149. zonisamide; |
| 150. zopiclone; |
| 151. zotepine; |
| 151. zotepine, 152. zuclopenthixol; |
| 152. Zuelopenunzoi, |

Prescriber's Guide- Stahl's Essential Psychopharmacology 6th Edition Test Bank

Chapter Questions on Alcohol abstinence/Alcohol dependence/Alcohol withdrawal 1.

A client has been prescribed naltrexone (Trexan) for treatment of alcohol dependence. The nurse has explained the drugs purpose to the client. The nurse determines that the client has understood the instructions when the client identifies which of the following about the drug?

A)

Causes itching if alcohol is consumed B)

Produces the euphoria of alcohol

C)

Reduces the appeal of alcohol D)

Improves appetite and nutritional status 2.

An adolescent client tells the nurse that he or she occasionally sniffs airplane glue. When discussing the effects of long-term use of inhalants, which of the following would the nurse most likely include?

A)

Tremors and CNS arousal B)

Enhanced normal heart rhythms C)

Enhanced attention focus and memory D)

www.nursylab.com

Brain damage and cognitive abnormalities

3.

A client tells the nurse that he is committed to trying to quit smoking. When teaching the client about smoking cessation, which of the following would the nurse include?

A)

Success usually involves more than one type of intervention.

B)

Relapse is fairly rare within the first year of quitting.

C)

Ear acupressure is a highly proven method for quitting.

D)

Education is key for smoking cessation.

4.

The nurse is completing the admission of a client who is seeking treatment for alcoholism. He tells the nurse that the last time he had any alcohol to drink was at 10:00 AM before he left for the hospital. The nurse closely monitors the client. Which of the following would lead the nurse to suspect that the client is experiencing stage 1 of alcohol withdrawal syndrome? Select all that apply.

A)

Slight diaphoresis

B)

Hand tremors C)

Intermittent confusion

D)

Heart rate of 135 beats/min E)

Normal blood pressure 5.

A nurse is talking with a 57-year-old client who has been a heavy drinker for many years. The client is being treated for alcoholism, and this is her second week as an inpatient on the psychiatric unit. It is 5:00 AM, and the client has been having difficulty sleeping. The client is an orthopedic nurse, and although she is clothed in a hospital-issued gown and robe, she is wearing a stethoscope around her neck that the nurse recognizes as belonging to one of the staff nurses. When the nurse asks her why she is wearing the stethoscope and where she got it, the client gives her a long and involved reply that basically describes how her nursing supervisor came to visit and gave it to her to wear so shed remember to get well. The nurse suspects that the client may be experiencing which of the following?

A)

Wernickes syndrome

B)

Delirium tremens C)

Korsakoffs psychosis D)

Malignant hyperthermia

6.

A nurse is using motivational therapy with a female client with alcoholism. The client, who is unwilling to consider changing her drinking behavior, emphatically states, I am not an alcoholic; you cant make me stop drinking. Which response by the nurse would be most appropriate?

A)

You have to stop drinking and driving; you could kill someone.

B)

Youre right; youre not an alcoholic.

C)

You should consider what you are doing to your marital relationship.

D)

Youre the only one who can make yourself stop drinking.

7.

A 52-year-old male client who has a history of alcohol dependence is admitted to a detoxification unit. He has tremors, he is anxious, his pulse has risen from 98 to 110 beats/min, his blood pressure has risen from 140/88 to 152/100 mm Hg, and his temperature is six tenths of a degree above normal. He is slightly diaphoretic. Which nursing diagnosis would be the priority?

A)

Disturbed Thought Processes B)

Risk for Injury C)

Ineffective Coping D)

Ineffective Denial 8.

A nurse is working with a client who is addicted to heroin. The nurse engages in harm reduction by teaching the client about which of the following?

A)

Using bleach solution to disinfect dirty needles

B)

Problem solving C)

Healthy coping skills D)

Proper use of naltrexone (Trexan) 9.

A 20-year-old man arrives at the emergency department by ambulance. He is unconscious, with slow respirations and pinpoint pupils. There are tracks visible on his arms. The friend who came with him reports that the client had just shot up heroin when he became unconscious. Which medication would the nurse most likely expect to administer?

A)

Naloxone

B)

Naltrexone

C)

Bupropion

D)

Varenicline

10.

A nurse is obtaining a history from a client who drinks about 6 cups of coffee and several diet cola drinks per day. The client states, I just cut down my coffee and soda intake to one per day. Which of the following would the nurse most likely expect to assess? Select all that apply.

A)

Headache

B)